5% of villages deserted
2 payams covered: Wau South & North, bomas A-E

49% assessed water points are non-operational (117/238)

72% of assessed health facilities operational (13/18)

26 doctors, 69% of functioning health facilities operating without doctors

91% of assessed schools operational (85/92)

11% average drop-out rate in 2017 because of conflict (48%), migration (16%) and other reasons (36%)

37:1 average Student to Teacher ratio (min 5; max 213)
Over 55 students / teacher at 15% of schools.

Reduced meals used as coping mechanism for food scarcity in all bomas

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**Main Recommendations**

- Rehabilitate shelter to support reintegration of returnees
- Provide basic resources to reinforce health care service delivery
- Increase sanitation and hygiene education campaigns

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**62,469 IDPs in Wau, of whom:**

- **16,150** IDPs in Wau town locations other than PoC1, PoCAA, and five collective centres
- **46,319** IDPs living in PoC1, PoCAA, and five collective centres

**26,310 returnees in Wau town of whom the majority returned from locations outside of Wau town within Western Bahr El Ghazal***

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*Data for IDPs in PoC1, PoCAA, and five collective centres according to DTM Headcount October 2017. Data for IDPs and returnees in Wau town locations other than PoC1, PoCAA, and five collective centres provided by payam and boma authorities as well as women, youth and returnee representatives of blocks A-E. Important to note that returnee numbers are not representative of IDPs who returned from the PoC sites and collective centres since the 2016 / 2017 crisis. According to DTM Flow Monitoring findings since late June 2017, a total of 3,400 persons have been observed leaving these sites (with exits on a declining trend), furthermore nearly half of observed exits were temporary, with only 56% indicating that they are planning to leave for more than 6 months. This suggests that returnees currently present in Wau town largely returned from other displacement areas.

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**Publication date: December 2017**
METHODOLOGY

The objective of this VAS report was to provide baseline data to map the basic needs and critical gaps of services in Wau North and South.

The sources of data used for VAS are derived from four complementary and integrated questionnaires: Boma Questionnaire, Payam Authorities Questionnaire, Health Technical Questionnaire and Education Technical Questionnaire.

<table>
<thead>
<tr>
<th>IOM Boma Mapping Survey</th>
<th>Payam Authority Questionnaire</th>
<th>Education Technical Questionnaire</th>
<th>Health Technical Questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conducted in each Boma with the</td>
<td>Conducted at each Payam with</td>
<td>Conducted at each education</td>
<td>Conducted at each health</td>
</tr>
<tr>
<td>administrators and representatives</td>
<td>the senior Payam authority</td>
<td>facility with the facility staff</td>
<td>facility with the facility</td>
</tr>
<tr>
<td>at the Boma level and representatives</td>
<td>(i.e. Payam Administrator or</td>
<td>(i.e. teachers or the headmaster)</td>
<td>(i.e. doctor or health officer)</td>
</tr>
<tr>
<td>of the returnee, women and youth groups</td>
<td>Executive Director)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A mixed methods approach of key informant interviews, focus group discussions and direct observation was utilised to collect and triangulate data throughout the data collection process. The data collection teams conducted the assessments in the locations of interest by physically visiting each of the bomas / residential areas or villages including health and education facilities. Ninety-four per cent of IDPs staying at PoC AA are from Wau County itself including Wau North, Wau South, Bagari, Basilla and Bazia. However, this report only covers Wau municipality, which was originally composed of Wau South and Wau North but is now divided into five blocks (namely block A, B, C, D, E) used for the VAS data collection.

In efforts to build the capacity of national and locally based actors, IOM conducted the VAS in close collaboration with the RRC.

IOM conducted a comprehensive three-day training for enumerators recruited by IOM. The first two days focused on effective data collection techniques and methods, an in-depth review of the questionnaires and technical training on GPS devices. On the third day, data enumerators applied the theory using the questionnaires and technical training on GPS devices by simulating a field exercise.

Following the successful completion of the training, the data collection teams were deployed to cover two payams, five bomas / residential areas and 84 villages.

For details on locations and profiles of all 238 water sources, 84 villages, 18 health facilities and 92 education facilities, please access the DTM VAS interactive portal at http://arcgis/1CffWX
CHALLENGES AND LIMITATIONS

The IOM DTM team faced a number of challenges and limitations during the assessments.

- Some areas are deserted due to insecurity. For example, Hai Jerusalem Block B and road accessibility to Pan-Ameth in Block E.
- Lack of archived records at the health and education facilities visited, which made it difficult to verify reported statistics such as on the number of school drop-outs, attendance rates or number of visitations.
- Chiefs and payam administrators do not know the exact population of their areas.
- Assessment fatigue among local authorities and beneficiaries: chiefs were tired of being interviewed by numerous agencies without humanitarian assistance being provided. Most of the bomas’ communities complained that a lot of assessments are regularly being carried out with no feedback.
- There were high expectations from the local community in terms of immediate response to their needs (food, water, and NFIs among others).

MAIN GAPS

- Food scarcity was reported to be a problem faced by inhabitants in all assessed bomas.
- The financial situation of health and educational facilities is so dire that trained personnel seek employment elsewhere. Subsequently, schools and hospitals are often run by untrained volunteers.
- While there are 85 operational schools in Wau, most operate on a very basic level and are in need of learning materials. Severely damaged schools require rehabilitation.
- Need for provision of water, beds and drugs at Wau hospitals. Health care centres need support in training, transportation and refrigeration to cope with future disease outbreaks.
- NFI / Shelter: many returnees find their previous homes in a dilapidated state in need of repairs or rehabilitation. Returnees need tools and shelter materials. These homes risk to burn in bush-fires during the dry season 2017/2018 due to the vegetation that took over during the owner’s absence. Returnees need tools to cut down the grass surrounding their homes.
- Sanitation and hygiene education campaigns are needed, especially in Blocks B and D.

Figure 1 Focus Group Discussion with Boma Representatives, Wau © IOM 2017 (Photo: Patrick Mokili)
Wau Overview

Wau is a county in Western Bahr El Ghazal State consisting of 5 payams, namely Wau North, Wau South, Baggari, Basilia and Bazia. The county is inhabited by Balanda, Dinka, Jur, Kresh, Golo, and other small tribes belonging to the broader Fertit community. Wau County is the administrative headquarters of Bahr El Ghazal State.

Public Administration

Wau town was formerly divided into two payams i.e Wau South Payam and Wau North Payam during the formations of public administration in 2011.

In 2012, the county headquarters of Wau County was transferred outside the town to Ngo Baggari. The Wau municipality council was formed as administrative unit within Wau town with five administrative blocks / payams. UN agencies and NGOs operating within Wau Town are using residential areas as units of analysis to deliver services in Wau County.

Displacement Dynamics

During the first six years following the signing of the Comprehensive Peace Agreement (CPA) in 2005, Wau residents had been living in peaceful coexistence. In Wau, the first incidence of renewed conflict occurred in 2012, triggered by the relocation of the Wau County headquarters from the town of Wau to Ngo Baggari area in Baggari Payam, while Jur River County headquarters was reassigned to the Nyin-akok area. Some of Wau’s inhabitants resisted the move, resulting in conflict and displacements into the compound of the United Nations Mission of South Sudan (UNMISS) base in Wau town. This move was only temporary and the displaced population returned shortly after.

Following the 2013 crisis between the SPLM and SPLM IO, Wau was affected and the conflict intensified in 2016 and 2017 fuelling continued displacement of Wau inhabitants into other part of Wester Bahr El Ghazal, the Area Adjacent to UNMISS Protection of Civilian Site (known as PoC AA site) and collective centres (especially church compounds and other settlement areas) within Wau Town to seek protection (see Wau Displacement Response Update, April 2017). A DTM intentions survey conducted at Wau PoC AA in April 2017 found that 87% of new arrivals report access to security and perception that PoC AA is safer than other sites as the main reasons for coming to the site.

Population Summary

Wau (North and South Payam) has an estimated population of 145,010 and is inhabited by Balanda, Dinka, Jur, Kresh, Golo, and small tribes (belonging to the Fertit community). Wau has major markets with goods available which have been originating mainly from Khartoum. The vast majority of individuals counted as returnees did not come from PoC or collective sites but fled Wau to mainly other in-state destinations during the 2016 / 2017 crisis and returned between July and November 2017.

<table>
<thead>
<tr>
<th>Payam</th>
<th>IDPs</th>
<th>Returnees</th>
<th>Host community</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wau North</td>
<td>650</td>
<td>1,400</td>
<td>45,000</td>
<td>47,050</td>
</tr>
<tr>
<td>Wau South</td>
<td>15,500</td>
<td>24,910</td>
<td>57,550</td>
<td>97,960</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16,150</strong></td>
<td><strong>26,310</strong></td>
<td><strong>102,550</strong></td>
<td><strong>145,010</strong></td>
</tr>
</tbody>
</table>

Estimated population according to 2008 population census (for host community), as well as IDP and returnee estimate (based on KI interviews: payam authorities, boma authorities, boma youth, women and returnee representatives)

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GENERAL OBSERVATIONS

Spontaneous returns of IDPs, overwhelmingly form areas outside of Wau, to their habitual residence are being observed. Villages still show signs of abandonment, with tall, bushy grass surrounding the houses, especially in areas that were partially or completely deserted. Houses in partially and completely deserted residential areas were void of personal belongings including furniture because of looting that took place during the 2016 / 2017 crisis.

Many residential areas in Block B, C, and D were deserted, either partially or completely during the 2016 / 2017 crisis. Partially deserted residential areas are Aweil Jedid, Hai Bafra, Hai Lokoloko, Hai Jebel Kheir, Hai Jezeera, Hai Salam, Hai Motamediya, Hai Nazareth, New Site, Hai Kosti, Hai Gonja, Masna Bira, Bazia Jedid, Hai Ingaz and Khorgana Jedid; whereas Hai Jerusalem, Ngobu, Hai Kamsin and Hai Kursat were completely deserted.

The main livelihood activities practiced in Wau are farming and daily labour activities. Agricultural production is affected and reduced by conflict in almost all bomas. All bomas in Wau town and surrounding villages have access to a major market to purchase basic goods and commodities in Jou, Wau and Hajar markets. Based on observation, vendors sell a variety of fruit at the market. Commodities are very expensive at these markets and commonly not affordable for returnees / IDPs and other inhabitants without a stable source of income.

Most infrastructure across the five blocks of Wau Town are permanent and semi-permanent buildings. Some infrastructure was severely damaged during the 2016 / 2017 crisis, some buildings were burnt to ashes, others lacked windows, doors or roofing while a number were found to be in good condition.

Generally, during the time of the assessment, the security situation was relatively calm at day, with a small number of isolated criminal activities during evening hours reported in deserted residential areas.

The presence of unexploded ordnances (UXOs) was recorded in Block E (Piantok Boma) in the east bank of Wau.

PAYAM LEVEL FINDINGS

<table>
<thead>
<tr>
<th>Displacement</th>
<th>Wau South (Block C, D and E)</th>
<th>Wau North (Block A and B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>With a total population in need of 97,960, Wau South is divided into three blocks (C, D and E). The payam was affected by the crisis of 2016 / 2017, during which most residents were displaced to PoC AA and to the collective centres (i.e. churches). Most returns (24,910 individuals) took place between July and November 2017 but from non-displacement site locations.</td>
<td>With a total population in need of 47,050, Wau North is divided into two blocks (A and B). The parts of Wau North Payam that were affected by the 2016 / 2017 crisis were Aweil Jedid, Hai Bafra, Hai Falata, Hai Kakario, Hai Lokoloko and Hai Jerusalem. Most returns (1,400 individuals) took place between July and November 2017.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Infrastructure</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Most of the buildings in the mentioned areas are surrounded by tall grass, representing a fire hazard. One village out of 43 was deserted.</td>
<td>Three out of 47 assessed villages are deserted due to the 2016 / 2017 crisis. Some buildings are lacking windows, doors and furniture. Most buildings in the mentioned areas are surrounded by tall grass, representing a fire hazard.</td>
<td></td>
</tr>
</tbody>
</table>

| FSL                      | Payam authorities report the presence of basic food security services. Farming is the main livelihood activity in Wau South. | Payam authorities report the presence of basic food security services which are limited by a lack of resources and trained personnel. The main source of livelihood in Wau North is farming. However, payam authorities reported that crop diseases and pests cause major livelihood shocks. |

| Education                | The payam has 36 operational* schools (25 primary and 11 secondary schools) and 4 non-functional schools. | Wau North Payam has 49 operational* (39 primary- and 10 secondary schools) and 3 non-operational schools. 46 per cent of all operational schools are located in Block B. |

*The term operational should not be misinterpreted as having adequate resources. Material and trained human resources were commonly lacking. Children were observed learning how to write in the sand meaning they were unable to keep a record and review what they had studied.

| WASH                     | There are 62 non-operational water points in the payam that require rehabilitation. Payam authorities reported the availability of basic water provision services. | Payam authorities reported the availability of basic water provision services, which were limited by an insufficiency of water resources. There are 55 non-operational water points that need rehabilitation. |

| Health                   | 3 out of 8 assessed health facilities were non-operational. 81% of doctors found in both payams are in Wau South. | The payam has 8 operational and 2 non-operational health facilities. Payam authorities reported the availability of health services which were limited by a lack of drugs and qualified personnel. |

| Protection               | Payam authorities reported the provision of basic protection services which were limited by continued armed conflict but also hunger. The effectiveness of conflict mitigation was reported to be limited by traditional beliefs and a lack of resources. |  |

Representatives of bomas in both payams report inhabitants have been exposed to an array of threats including increased criminality (especially at night), armed conflict, cattle raiding and domestic violence.
**Livelihoods**

- All bomas practice farming and fishing as means of livelihood. Key informants reported employment as means of income in three out of five bomas. Inhabitants of all bomas were said to practice income generating activities.
- Farmers report watering their crops with both rain and through irrigation (only rain in block D). Crops include maize, sorghum, sesame, groundnuts, and vegetables. Rice was not grown and millet and cassava to a lesser extent. Farmers in all bomas reported to use seeds from previous harvests as well as from the market. All farmers reported to be selling crops at the markets including maize, sorghum, groundnuts, as well as cassava and onions to a limited extent.
- All bomas reported access to major markets nearby. In each boma, inhabitants had access to food such as vegetables, fruit, livestock meat, milk, and to a lesser extent fish, chicken fowl and beans.
- In all block but E, farmers find support in communal farming. Wholesale traders supported farmers in Block B and extension services represent a support mechanism in Block C and D. Farmer in Block C and D are supported by UN FAO and NGOs while Block A and B received support from the community.
- Key respondents in Blocks B, C and D reported needs in terms of inputs and technologies. Need for land was reported in Block B. Farmers of most blocks reported needs for tools, seed, fertilizers and training. Block B cited a need for labour, too. Technological needs are constituted of tractors, compost fertiliser, and irrigation equipment. Block C and E also reported a need for ox ploughs.
- All boma representatives as well as payam authorities of Wau North cited crop diseases as a major problem that affected the production of food crops. Boma representatives of Block B further cited natural disasters as having a negative impact on agricultural outputs. Conflict was cited to impede agriculture activities in all bomas apart from Block B.
- Inhabitants of Block A, B and Block E owned livestock. However, a livestock market allowing owners to sell their products was only found in Block B. Veterinary services were solely available in Block B. Cooperatives were available to livestock keepers in Block A and Block E had access to a slaughter house. Bomas of Wau North reported private business as being supportive of livestock keeping. The market facilities were not deemed operational enough and pose a major problem that affects livestock herders in Boma B. Other problems faced by livestock keepers were cited to be conflict, diseases, and limited grazing land.
- Food scarcity was reported to be problem faced by inhabitants in all bomas. This scarcity develops during the rainy season (Block B, E and D) or is present throughout the year (Block A and C). Inhabitants of all bomas are reported to reduce meals as coping mechanisms during these times. Cash benefits support individuals in Block B and D when food is scarce. Other common coping mechanisms were cited to be help form extended family and foraging of forest fruit or vegetables. Temporary migration or food aid were not cited to be common coping mechanisms.
- All bomas reported major livelihood shocks over the past two years, which included conflict (all bomas), drought (Block D), floods (Block B), livestock disease (Block A, B and E), crop disease (D and E) and pests (Block E).
- The main coping mechanism in all blocks apart from Block E had been to rely on external assistance as opposed to other options such as taking loans or selling livestock. Inhabitants of Boma C and A were also known to migrate to cope with livelihood shocks.
- Key informants of Block A and D reported seasonal migration practiced by male and female youth.

### Health

<table>
<thead>
<tr>
<th></th>
<th>Hospitals</th>
<th>Primary Health Care Centre</th>
<th>Primary Health Care Unit</th>
<th>ALL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Operational</td>
<td>Non operational</td>
<td>Operational</td>
<td>Non operational</td>
</tr>
<tr>
<td>Wau North</td>
<td>1</td>
<td>0</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Block A</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Block B</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Wau South</td>
<td>1</td>
<td>0</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Block C</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Block D</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Block E</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>2</td>
<td>0</td>
<td>7</td>
<td>1</td>
</tr>
</tbody>
</table>
DTM found no operational health facilities in Block E. Five health facilities were found to be non-operational due to a lack of staff and other unknown reasons. Non-operational health facilities had reportedly stopped operating in 2017, 2015, 2012, 2011 and 2006. Operational health facilities were found in Block A (4), B (4), C (2) and D (3). However, inhabitants in Block C reported to be unsatisfied with their facilities. Health facilities in Block A were reported to be satisfactory and visited by inhabitants.

The most common supporter of health facilities were the government (6 facilities representing 46%) and NGOs (5, i.e. 38%) followed by religions organisations (1, i.e. 8%) and diaspora (1, i.e. 8%).

Five out of 13 operational health facilities (38%) were not housed in appropriate, safe and secure buildings. Fifteen per cent of buildings were temporary and 23 per cent only semi-permanent. The remaining 62 per cent were found to be in permanent buildings.

Clinical waste was buried in the ground at three establishments (23%) or else burnt (31%) and disposed of with an incinerator (46%).

Apart from Block A, all bomas reported immunisations campaigns in 2017 that were last carried out in September in Block C (UN / NGO), August in Block D (UN / NGO) and March in Block E (government).

Block B, E and D were reported to have undergone health education awareness campaigns within the past year.

All operational healthcare facilities report to either Integrated Disease Surveillance and Response (IDSR), the Ministry of Health or the Health Management Information System (HMIS).

All operational health care facilities (13) have trained staff which include a total of 26 doctors and 175 nurses. Human resources are unevenly spread and while nine out of 13 facilities operate without doctors, 21 out of 26 doctors (81%) work for the Wau Teaching Hospital where 57 per cent of all recorded human resources are concentrated.

While Wau Teaching Hospital employs 57 per cent of all available trained staff in the four bomas, it has treated only 13 per cent of all patients of the 13 operational facilities in 2017.

Combined, operational healthcare facilities have treated 145,722 individuals of which 52 per cent were female and 48 per cent male. Zero to five-year-old patients made up 30 per cent. Women and men above the age of 18 constituted 40 per cent of all patients in equal proportions. Between the ages of 6 and 17, sixteen per cent of patients were female and 14 per cent male. Please note that these figures are only indicative as many facilities did not keep archived records.

Capacities: of 13 operational health-care facilities…
- four (31%) had inpatient capacities;
- seven (54%) included a maternity ward;
- six (46%) owned a laboratory;
- seven (54%) provided health education;
- six (46%) had a feeding centre;
- four (31%) provided psychosocial support;
- five (38%) had vehicles available for referral.

Only one health care facility reported that patients paid for treatment (Kika Hadid PHCC in Block B).

Two facilities of Block B reported a measles outbreak in 2017 (Bar-Yar A PHCC and Hai Bafura PHCC). Hai Zande Mutah PHCC in Block C described a malaria outbreak in 2016. Two facilities in Block D and B reported a chicken-pox outbreak in the same year (Nazareth Health Facility, IOM and Hai Bafura PHCC). Training and transport support were cited to be the most needed to cope with future disease outbreaks.

According to a health facility in Block B, measles is the most likely disease outbreak. A health facility in Block A expects malaria to be the most possible upcoming disease outbreak.

Twelve out of 13 operational health facilities (92%) provide full schedule of immunization for children. For 12 facilities (92%), the main supported for vaccination campaigns is the World Health Organisation (WHO) (for one facility it was an NGO).

Twelve out of 13 health facilities (92%) have conducted health education session for bomas.
During the past year, inhabitants of all bomas reported having been exposed to armed conflict. Cattle raiding was cited as an issue in Block A, B and E. Block A had additionally experienced floods. Hunger was said to have especially affected Block C and D.

Risks and threats to the population encountered in the bomas during the last two years include local conflict (Block A), domestic violence (Block B, C and D) and seasonal road access (Block A).

All bomas reported the presence of a police station and that cases were referred to the police. These cases included rape, murder, theft and in one boma abduction. Cattle theft was reported in two bomas and assault in three out of five blocks.

Access to a judicial court is available in all bomas apart from Block B and E.

Unaccompanied and separated children in the boma are cared for by relatives and community support. One boma reported unaccompanied children living on their own.

Women reported feeling insecure in four bomas, Block B, C, D and E.

<table>
<thead>
<tr>
<th>Education</th>
<th>Operational Primary Schools</th>
<th>Non-operational Primary schools</th>
<th>Operational Secondary Schools</th>
<th>Non-operational Secondary Schools</th>
<th>Total operational</th>
<th>Total Non-operational</th>
<th>All assessed schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wau North</td>
<td>39</td>
<td>3</td>
<td>10</td>
<td>0</td>
<td>49</td>
<td>3</td>
<td>52</td>
</tr>
<tr>
<td>Block A</td>
<td>8</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>10</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>Block B</td>
<td>31</td>
<td>3</td>
<td>8</td>
<td>0</td>
<td>39</td>
<td>3</td>
<td>42</td>
</tr>
<tr>
<td>Wau South</td>
<td>25</td>
<td>3</td>
<td>11</td>
<td>1</td>
<td>36</td>
<td>4</td>
<td>40</td>
</tr>
<tr>
<td>Block C</td>
<td>14</td>
<td>2</td>
<td>10</td>
<td>0</td>
<td>24</td>
<td>2</td>
<td>26</td>
</tr>
<tr>
<td>Block D</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>7</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>Block E</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>5</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>64</td>
<td>6</td>
<td>21</td>
<td>1</td>
<td>85</td>
<td>7</td>
<td>92</td>
</tr>
</tbody>
</table>

| Block A   | 4,650                       | 10%                            | 506                           | 11%                             | 137               | 11%                  | 34                 |
| Block B   | 22,453                      | 47%                            | 2,018                         | 9%                              | 587               | 45%                  | 38                 |
| Block C   | 13,439                      | 28%                            | 1,520                         | 11%                             | 395               | 31%                  | 34                 |
| Block D   | 4,851                       | 10%                            | 1,172                         | 24%                             | 102               | 8%                   | 48                 |
| Block E   | 2,265                       | 5%                             | 108                           | 5%                              | 70                | 5%                   | 32                 |
| OVERALL   | 47,658                      | 100%                           | 5,324                         | 11%                             | 1,291             | 100%                 | 37                 |


DTM examined 85 operational educational facilities in all blocks. The majority were located in Block B (46%) and Block C (28%).

Seven out of 92 schools were non-operational of which the majority were closed in 2016 and 2017.

School standards were deemed satisfactory by parents in Block A, B and C.

All schools taught the new South Sudanese curriculum in English.

Children in Block D and B were said to attend schools in other bomas due to the absence of schools and walk 1 to 1.5 hours in the case of Block D and more than 1.5 hours from Block B. In bomas containing schools, children walked 30-60 minutes (Block C) and less than 30 minutes (Block A).

DTM interviewed representatives of 92 schools of which 70 (76%) were primary schools and 22 (24%) were secondary schools. Nine per cent of primary and five per cent of secondary schools were non-operational.

Seventy-seven per cent of primary schools taught the standard 1 to 8 years and at least 86 per cent of secondary schools taught standard 1 to 4-year curriculum.

Representatives reported that 25 per cent of school were unable to accommodate all school children of the catchment area. Eighty-nine per cent of schools were accommodating children from other bomas.
Out of a total of 47,658 students at all 85 operational schools, 46 per cent were male and 54 per cent female.

Of 5,324 dropouts in 2017, 51 per cent were female and 49 per cent male. On average 11 per cent of students in a given boma have dropped out of school in 2017. The highest drop-out rate was found to be in Block D with 24 per cent.

For 48 per cent of students who had dropped out in 2017, the principal reason was conflict.

Of 1,291 teachers 74 per cent were male and 26 per cent were female. Whereas on average the student teacher ratio was 37 to one, stark differences could be seen, with the maximum ratio reaching 213 to one (John Paul Secondary School, Block C) and the minimum five to one (Daniel Ali Primary School, Block C). The highest male to female ratio amongst teachers was found in Block E where 90 per cent of teachers were male.

School representatives reported in 61 per cent of educational facilities that teachers were trained. In 21 per cent of cases teachers were described as untrained and in 15 per cent as volunteers. In two per cent of schools, the level of training was unknown.

Sixty-eight per cent of operational schools reportedly teach disabled children. Of these, 80 per cent have physical disabilities, 12 per cent have a hearing impairment and 8 per cent visual impairment.

Educational facilities were often run-down and damaged. Forty-two per cent of operating school buildings were not deemed safe and secure. Of all 92 assessed schools, 33 per cent were temporary shelter structures and 11 per cent semi-permanent buildings. The remaining 57 per cent were described as permanent buildings.

Forty-eight per cent of schools reported that the number of classes were insufficient. Forty-three per cent reported classes to be sufficient and no response was given for nine per cent.

School furniture was deemed sufficient at only 22 per cent of schools, whereas 67 per cent reported availability of furniture that is insufficient to operate. Seven per cent of schools reported no furniture at all (unknown for 2%).

Latrines were cited to be insufficiently available at 58 per cent of operational schools. Eight per cent had no latrines at all. Thirty-two per cent of schools cited sufficient latrines (unknown for 2%).

Nearly half of all schools (42%) claimed to not have drinking water available for students (available at 54% and unknown for 4%). Only 16 per cent reported having non-drinking water available for hygiene.

Families are requested to pay school fees at 81 per cent of establishments and 80 per cent report parents finding it difficult to come up with the money. As a consequence of non-payment, students are dismissed (11%) or suspended (9%). Twenty-eight percent of educational establishments delay school results, whereas a quarter (24%) do not penalize students. For 28% the consequences of non-payment are unknown.

The largest proportion of operational schools were privately run (32%) while 29 per cent were government run. NGO-run schools made up five per cent of operating facilities.

In 80 per cent of cases, students were reported to continue with further education elsewhere. In 14 per cent of schools it was not common (unknown for 6%).

Only 27 per cent of schools could confirm that accelerated learning options were available to students. In 39 per cent of these schools, accelerated learning support was offered by NGOs. In other cases, these programmes were offered by the government (26%), the community (17%), religious organisations (9%) and the private sector (9%).
• Boma representatives reported insufficient water access all bomas apart from Block A. Access to water for inhabitants of Block A and D had was season-dependant.
• Households collect water from a variety of sources including a well (Block D and A), a water tank (block C), a borehole (Block E) and a stream (Block B).
• Water user committees were formed and active in three out of the five bomas (Block C, E and A). Boreholes were commonly maintained by the community or by the UN / NGOs in the case of Block E.
• Households in Block A and B had to pay for access to water.
• Three out of five bomas reported instances of water-related conflicts (Blocks B, C and E).
• Latrines were not present in Block E according to boma representatives. Existing latrines were generally open air / bush latrines or household latrines. Findings indicate that inhabitants of Block A and B made use of these facilities but they remained unused in Block C and D (no response for Block E). Lack of use was due to cultural beliefs (Block C) or a lack of awareness (Block C and D).
• Inhabitants of Block B and D reported never having received sanitation and hygiene education.

Figure 2 Non-operational borehole, Wau © IOM 2017
(Phot: Patrick Mokili)