



Protection Risk Assessment

Final Report

April 2025

Submitted to GOAL South Sudan by STOOS Consulting
Kenya



EXECUTIVE SUMMARY

The Protection Risk Assessment of the THRIVE programme in South Sudan was conducted across six counties: Rubkona, Renk, Fashoda, Panyikang, Panyijar, and Akobo. It reveals a complex landscape of vulnerability shaped by ongoing conflict, displacement, gender inequality, and structural exclusion. Drawing on data from household surveys, Focus Group Discussions (FGDs), and Key Informant Interviews (KIIs), the assessment identifies both acute protection threats and chronic service delivery gaps that undermine the safety, dignity, and participation of marginalized populations.

The assessment was guided by a mixed-methods approach and prioritized the voices of at-risk groups, including women, adolescent girls, internally displaced persons (IDPs), returnees, and persons with disabilities (PWDs). The findings aim to inform THRIVE's programme design, risk mitigation efforts, and protection mainstreaming across all intervention areas.

Key Findings

Gender-Based Violence (GBV) is a pervasive risk across all targeted counties. Women and girls face threats of harassment, assault, and coercion in both private and public spaces, particularly when accessing water, markets, or education. Fear of violence significantly restricts their movement and economic participation. GBV remains widely underreported due to fear of retaliation, stigma, and mistrust in existing reporting mechanisms.

Child Protection Risks are widespread, with early and forced marriage, school dropout, and child labor increasingly reported. These risks are exacerbated by food insecurity, displacement, conflict, and the subsequent erosion of family and community-based protection systems. Adolescent girls and boys face heightened vulnerabilities and limited access to age-appropriate services.

Displacement and Exclusion: IDPs and returnees frequently experience discrimination and marginalization including barriers to accessing documentation and local services, while host community members face barriers in accessing aid despite high levels of need. Persons with disabilities face extreme isolation, compounded by physical barriers, stigma, and lack of inclusive service design.

Weak Access to Protection Services: The majority of respondents lacked awareness of where to report abuse or seek support. Available complaint mechanisms are often informal, inaccessible, or mistrusted. Referral systems are inconsistently applied, particularly in rural and newly resettled areas.

Institutional and Coordination Gaps: State-led protection services are severely under-resourced, while local NGO staff often lack the tools, training, or coordination structures needed to deliver effective and accountable protection programming. Safeguarding systems are in place on paper but are not consistently translated into awareness or outreach.

Recommendations



The report outlines key programmatic recommendations to strengthen protection outcomes under THRIVE:

- **Mainstream protection across all programme activities**, integrating protection risk assessments, safe programming principles, and disaggregated monitoring systems.
- **Strengthen GBV referral pathways**, survivor-centered services, and community outreach, in coordination with local protection actors.
- **Reinforce child protection systems**, including youth engagement, safeguarding integration, and community-based awareness on early marriage and child labor.
- **Promote the inclusion of IDPs, returnees, and PwDs** through targeted outreach, inclusive targeting tools, flexible service delivery models, and community cohesion initiatives.
- **Strengthen complaint and feedback mechanisms** by ensuring they are accessible, confidential, and trusted, and supported by trained focal points and clear response procedures.
- **Build institutional capacity and safeguarding systems**, including decentralized coordination platforms, mandatory staff training, and community awareness on PSEA and reporting rights.



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ACRONYMS

AAP	Accountability to Affected Populations
CSO	Civil Society Organization
FGD	Focus Group Discussion
GBV	Gender-Based Violence
GESI	Gender Equality and Social Inclusion
GOAL	GOAL Global (Implementing Organization)
IDP	Internally Displaced Person
INGO	International Non-Governmental Organization
KII	Key Informant Interview
NGO	Non-Governmental Organization
PoC	Protection of Civilians (sites)
PwD	Person with Disability
THRIVE	Transforming Household Resilience through Inclusive Economic development in South Sudan

1. BACKGROUND AND CONTEXT

In South Sudan, a protracted crisis driven by cycles of conflict, widespread displacement, and environmental shocks continues to undermine the safety and well-being of millions. The Greater Upper Nile region in particular remains vulnerable to violence, intercommunal tensions, and weak institutional protection mechanisms. These challenges disproportionately affect women, children, persons with disabilities (PwDs), internally displaced persons (IDPs), and returnees, whose vulnerabilities are often exacerbated by limited access to services, discrimination, and insecurity.¹

Within this fragile context, the THRIVE (Transforming Household Resilience through Inclusive Economic development) programme being implemented by a consortium of partners led by GOAL, aims to build the resilience of vulnerable households through integrated interventions focused on economic empowerment, social cohesion, climate adaptation, and protection. While livelihoods and resilience are central to THRIVE's objectives, the programme recognizes that sustained recovery cannot be achieved without addressing the protection risks that inhibit participation, restrict movement, and threaten basic human rights.²

This protection assessment was conducted to identify and analyze the most pressing protection risks faced by target populations across six counties: Renk, Fashoda, Panyikang, Rubkona, Panyijar, and Akobo. It seeks to deepen the understanding of gender-based violence (GBV), child protection concerns, displacement-related vulnerabilities, and the effectiveness of existing safeguarding and accountability mechanisms.

By generating localized, evidence-based insights, this assessment will inform THRIVE's programming to ensure it is safe, responsive, and sustainable and supports inclusive and protective environments for those most at risk.

Protection risks are deeply gendered and intersectional. Women and girls are at heightened risk of gender-based violence (GBV), including sexual violence, early and forced marriage, and domestic abuse. Children, particularly those displaced or living in female-headed households, are vulnerable to child labour, recruitment into armed groups, and neglect, while persons with disabilities face systemic exclusion from services and decision-making spaces.

Key structural factors contributing to the protection crisis include:

- Weak legal and judicial systems, limit access to justice and accountability.
- Limited availability of GBV response services, including psychosocial support and safe spaces.
- Lack of protection-sensitive livelihoods programming exposes vulnerable individuals to exploitation and abuse.

¹ UNDP, 2024, [South Sudan: Assessing and Strengthening Local Governance for Inclusive Development | United Nations Development Programme](#). Accessed April 2025.

² THRIVE – Transforming Household Resilience Throughout Inclusive Economic Development in South Sudan, GOAL, Mercy Corps, CAFOD and VSF Suisse, 2024. Accessed March 2025



- Stigmatization and discrimination based on gender, disability, or displacement status.
- Breakdown of community-based protection mechanisms, including traditional leadership structures and customary mediation.

1.2 Protection Priorities within the THRIVE Programme

The THRIVE programme acknowledges that resilience cannot be sustainably achieved without addressing the protection risks and safety concerns affecting vulnerable populations in South Sudan. As the programme works to strengthen livelihoods, food security, climate adaptation, and social cohesion, it places growing emphasis on integrating protection-sensitive approaches into all aspects of its implementation.

Key protection priorities within THRIVE include:

- **Mitigating Gender-Based Violence (GBV)** through community-based awareness, safe space creation, and referral pathways, particularly in areas with high risks for women and girls.
- **Strengthening Safeguarding and Accountability Mechanisms**, ensuring that programme staff and partners uphold clear codes of conduct and that affected populations know how to report abuse, exploitation, or misconduct.
- **Supporting Protection for Displaced Populations**, including IDPs and returnees, by addressing access to services, land-related disputes, and inclusion in recovery activities.
- **Reducing Protection Risks Linked to Livelihoods and Resource Access**, particularly for women, youth, and PwDs who may face exploitation, unsafe labour conditions, or exclusion from economic opportunities.
- **Promoting Inclusive and Conflict-Sensitive Programming**, with attention to ethnic and gender dynamics, local power structures, and the potential for unintentional harm in targeting or aid delivery.

This protection assessment contributes to these goals by providing localized, evidence-based insights into the risks, capacities, and service gaps that shape the daily realities of individuals and communities. It will also offer practical recommendations for strengthening THRIVE's protective impact, ensuring that its activities not only enhance resilience, but also uphold the safety, dignity, and rights of all participants.

2. METHODOLOGY AND SAMPLING

The assessment applied a mixed-methods, participatory approach to generate a comprehensive understanding of protection risks, needs, and capacities across six counties targeted by the THRIVE programme - Renk, Fashoda, Panyikang, Rubkona, Panyijar, and Akobo. The methodology prioritized inclusion, safety, and conflict sensitivity, focusing particularly on the experiences of women, girls,



youth, persons with disabilities (PwDs), internally displaced persons (IDPs), returnees, and other at-risk groups.

By combining qualitative methods, Key Informant Interviews and Focus Group Discussions, with quantitative household surveys, the assessment enabled a nuanced examination of protection issues from both institutional and community perspectives. The mixed-methods approach allowed for triangulation of findings and supported evidence-based recommendations tailored to the realities of THRIVE implementation areas.

This approach was underpinned by three key principles:

1. **Do No Harm:** Ensuring that all interactions with participants minimize risks and prioritize well-being.
2. **Inclusion and Accessibility:** Engaging diverse groups in ways that accommodate age, gender, disability, and language needs.
3. **Local Ownership and Relevance:** Framing the inquiry around issues raised by local actors and aligning with THRIVE's operational goals.

2.1 Desk Review

The desk review provided a foundation for the assessment by contextualizing protection risks and identifying key gaps in knowledge. This literature informed the development of the data collection tools, identified historical trends in protection risks (e.g., GBV, forced displacement, lack of service access), and highlighted variations in risk exposure across counties and population groups. It also helped shape lines of inquiry for the KIIs and FGDs, ensuring alignment with local protection concerns and programming priorities.

Documents reviewed included:

- THRIVE programme proposals, implementation plans, and safeguarding frameworks
- GOAL internal documents and partner operational strategies
- Protection and GBV cluster reports, 5W matrices, and inter-agency assessments
- Recent studies by OCHA, UNHCR, UNICEF, and protection-focused INGOs
- Relevant government policies and community-based protection frameworks

2.2 Focus Group Discussions (FGDs)

Twelve FGDs were held across six counties, grouped by gender, age, and/or livelihoods to create safe and inclusive spaces for open dialogue. Groups included women's groups, youth leaders, male farmers and business owners, elderly representatives, and marginalized community members such as IDPs and PwDs, ensuring a diversity of lived experiences.

Discussions covered:



- Types of services provided by THRIVE partners and perceptions of fairness, accessibility, and inclusion in service delivery
- Physical, logistical, and social barriers to accessing services, including transport, security risks, overcrowding, and discrimination
- Gender-related obstacles to reporting concerns, including cultural stigma, fear of reprisal, and lack of trust in complaint mechanisms

The participatory nature of FGDs encouraged deeper engagement, allowing facilitators to uncover dynamics not easily captured through surveys or KIIs.

County	Category	Number
Renk	Male community members	1
Fashoda	Male community members (adults, elderly)	1
	Male farmers & traders (mixed ages)	1
Panyikang ³	Female community members (adults, elderly)	1
	Male community members (adults, elderly)	1
	Female youth	1
	Male youth	1
Panyijar	Female farmers (adults, elderly)	1
Akobo	Female youth	1
	Male community members (adults, elderly)	1
Rubkona	Female farmers (adults, elderly)	1
	Female community members (mixed ages)	1
TOTAL		12

2.3 Key Informant Interviews (KIIs)

Sixteen Key Informant Interviews were conducted with a diverse range of stakeholders, including GOAL staff, NGOs, government representatives, local authorities, CSOs, and traditional leaders. These interviews offered valuable insights into how protection risks and needs are addressed in policy and practice, as well as challenges in programme implementation.

The KIIs helped explore:

- **Prevalent protection risks**, including GBV, violence against children, and forced evictions
- **Institutional capacities** for protection and referral
- **Community-level accountability** mechanisms and informal justice systems
- **Service accessibility and barriers** for women, girls, youth, and persons with disabilities
- **Safeguarding challenges**, including knowledge gaps and reporting hesitancy

³ Due to prevailing and escalating insecurity in Panyikang, a decision was made to relocate the FGDs to Malakal with IDPs from Panyikang



Interviews were conducted either in person or remotely, depending on access and security considerations. Interview guides were adapted for each stakeholder group to ensure relevance and depth of discussion.

KII Category	Sample Size	Localities
GOAL Senior Staff	3	National & Regional levels
Implementing Partners	2	Regional levels
Local Government Officials and Local Authorities	5	Akobo, Panyikang, Panyijar, Renk, Rubkona
Community Leaders	3	Panyijar, Rubkona, Fashoda
Civil Society Organizations (CSOs) & NGOs	3	Akobo (2), Panyijar
TOTAL	16	

2.4 Household Surveys

Household surveys were used to gather quantitative data from 389 respondents across the six counties, using a stratified sampling approach based on gender, age, displacement status, and disability. Surveys were conducted face-to-face using mobile data collection tools and included structured questions on:

- Perceptions of safety and personal security
- Incidents of violence or harassment at home, in public spaces, or during displacement
- Access to protection-related services (e.g., psychosocial support, legal aid, child protection)
- Awareness and use of safeguarding and complaint mechanisms
- Trust in authorities and humanitarian actors to address protection concerns

Data was anonymized, cleaned, and analyzed using descriptive statistics to highlight trends across population groups and counties, with disaggregation by sex, age, and vulnerability status.

County	Estimated Population	Population Share (%)	Female Youth	Female Adults	Male Youth	Male Adults	TOTAL	% of survey total (389)
Panyijar	76,152	7.40%	9	10	4	18	41	10.54%
Renk	210,351	20.45%	19	13	20	12	64	16.45%
Fashoda	83,775	8.14%	6	18	1	22	47	12.08%
Panyikang	69,656	6.77%	0	28	0	25	53	13.62%



Rubkona	361,802	35.17%	16	30	11	55	112	28.79%
Akobo	226,978	22.06%	8	28	12	24	72	18.51%
TOTAL	1,028,714	100%	58	127	48	156	389	100%

2.5 Challenges, Limitations, and Mitigation

The Protection Risk Assessment faced significant challenges stemming from the volatile political context and persistent conflict-related insecurity in the THRIVE implementation counties. Intermittent clashes, displacement, and civil unrest delayed fieldwork and limited physical access to several high-risk or remote locations. These disruptions necessitated the rescheduling of interviews and the use of remote data collection tools in areas where face-to-face engagement was not feasible. Furthermore, though Nasir and Ulang counties were originally intended to be included in the study, they had to be removed due to escalating violence in the area at the time of data collection. They were replaced by Panyijar and Rubkona, two other THRIVE program target locations.

Stigma and fear around reporting sensitive issues, such as sexual and gender-based violence, child marriage, and abuse, led to underreporting in both FGDs and KIIs. The research team responded by applying survivor-centred approaches, ensuring participants' privacy, and reinforcing safe disclosure practices. While this helped build trust, deeply rooted fears and limited awareness of referral mechanisms still constrained the depth of some findings.

Language barriers and literacy gaps also presented limitations, particularly among the elderly and displaced populations. This was mitigated by recruiting local enumerators familiar with dialects and cultural context, and by using oral consent and visual prompts during surveys.

Despite these obstacles, the protection analysis benefited from a combination of qualitative and quantitative tools, local partnerships, and continuous adaptation to field realities, ensuring that the findings reflect the lived experiences of vulnerable populations in a dynamic and complex setting.

2.6 Safety and Do No Harm

Ensuring the safety, dignity, and well-being of all participants was a core principle guiding this assessment. The research team adopted a **Do No Harm approach**, recognizing the sensitivity of discussing gender, inclusion, and social barriers in contexts affected by conflict, displacement, and structural inequality.

Before fieldwork began, a thorough risk analysis was conducted to assess potential threats to both participants and data collectors. Based on this, mitigation strategies were developed in collaboration with GOAL field teams. These included:

- **Careful selection of interview and FGD locations** to ensure safe, neutral, and private settings, particularly for women, youth, and persons with disabilities.



- **Use of same-gender enumerators and facilitators** in all KIIs and FGDs involving sensitive topics such as gender roles, social stigma, or experiences of exclusion.
- **Anonymization of all data** to protect the identities of respondents, particularly when discussing issues that may involve social or political sensitivities.
- A **real-time monitoring system** was used to assess field conditions and respond to emerging risks, including conflict flare-ups or changes in access.

All enumerators were trained in confidentiality, informed consent, power dynamics, cultural sensitivity, and ethical engagement with vulnerable populations. Efforts were made to ensure that participation in the assessment was not only voluntary, but also meaningful and respectful of participants' rights, privacy, and time.

The Do No Harm principle was also applied to the design and framing of survey and discussion tools, ensuring that questions were non-intrusive, locally appropriate, and structured to avoid reinforcing harmful assumptions or triggering distress.

3. FINDINGS

The protection landscape in the THRIVE target counties covered in this study - **Rubkona, Renk, Fashoda, Panyikang, Panyijar, and Akobo** - is shaped by years of protracted conflict, displacement, and weak access to justice or public services. Across all locations, community members highlighted a **sense of chronic insecurity**, particularly for women, girls, and IDPs, who often face protection-related barriers when accessing markets, water points, or basic services.

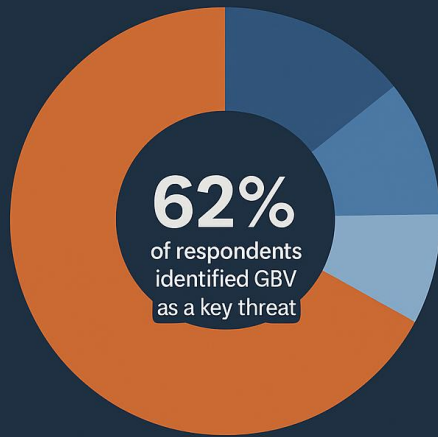
3.1. Gender-Based Violence Risks and Barriers to Response

Gender-based violence (GBV) remains one of the most pervasive and entrenched protection concerns within the THRIVE programme implementation areas. Evidence from household surveys, KIIs, and FGDs confirms the widespread nature of GBV, particularly affecting women and girls, internally displaced persons (IDPs), returnees, and persons living in rural or insecure areas. The risks are exacerbated by entrenched gender norms, limited mobility, economic dependency, conflict-related displacement, and the absence of a functioning, survivor-centered protection system.

Widespread Risk and Normalization of GBV

Across the counties of Renk, Fashoda, Panyikang, Panyijar, Akobo, and Rubkona, GBV was consistently ranked by community members and stakeholders as one of the most pressing safety and protection concerns. Data from the THRIVE household **survey shows that over 71% of respondents, male and female, identified GBV as a primary threat to women, youth, and vulnerable groups**, a trend corroborated by community-level discussions.

GENDER-BASED VIOLENCE: THE MOST REPORTED PROTECTION CONCERN



■ Gender-Based Violence
 ■ Intercommunal Violence
■ Child Protection Risks
 ■ Other

Women's FGDs in Rubkona and Panyikang emphasized that the risk of physical and sexual violence has become normalized, particularly in relation to daily survival activities such as fetching water, attending markets, or walking unaccompanied. As a women's FGD participant from Panyikang exclaimed:

"Even basic needs put us in danger! Walking miles to dirty river water exposes us to rapists."

Youth FGDs echoed this concern. Adolescent girls reported that they are often prevented by family members from attending school or participating in training programmes due to the

perceived risks of assault or harassment, especially during travel.

Additionally, KIIs with local authorities and CSO representatives in Fashoda and Akobo noted the prevalence of violence within the home, frequently linked to stress caused by poverty, displacement, and food insecurity. Respondents indicated that GBV is rarely addressed due to the belief that such issues fall within the private domain.

Barriers to Disclosure and Help-Seeking

While the incidence of GBV is high, the rate of disclosure remains critically low. While 61% of survey respondents reported that they or someone in their household had experienced GBV in the past year, **only 1 in 5 reported that these incidents had been brought to the attention of any authority**, formal or informal. Among those that were reported, **community leaders (37%) and local authorities (22%) were most often approached, whereas less than 20% of cases were brought to NGOs, clinics, or protection actors.**

The reasons for this underreporting were consistent across the data:

- Fear of retaliation, particularly in cases involving intimate partners or family members.
- Deep-rooted stigma, where survivors, especially adolescent girls, are blamed or ostracized.
- Lack of confidentiality and trust in formal and informal mechanisms alike, particularly in small, closely-knit communities where news travels quickly and perpetrators may be protected by family or power structures.

In Panyijar, a woman FGD participant stated:



“Domestic violence is everywhere here. Many women are beaten, but they have nowhere to run or report.”

Limited Knowledge of Services and Inaccessible Referral Pathways

The household survey found that **69% of respondents did not know where to go for GBV-related services**. In FGDs, participants frequently cited inaccessibility of health centers, lack of psychosocial services, and absence of designated safe spaces for women and girls. The situation is more severe in rural and displacement-affected areas, such as parts of Panyikang and Fashoda, where no functional protection actors were known to community members.

Even in areas with NGO presence, support was described as intermittent, short-term, and at times, perceived to favour those living in Protection of Civilian (PoC) sites or formal camps, excluding host communities and returnees.

GBV as a Barrier to Economic Participation

A significant theme emerging from the analysis is the intersection of GBV and barriers to women’s and girls’ economic participation. When asked about challenges to participating in livelihoods activities, **71% of surveyed women and female youth cited fear of GBV or harassment**. This perception was particularly strong in Renk, Fashoda, and Panyijar. As a woman in an FGD in Akobo explained:

“My concern is about youth who intend to rob/rape us along the way when we go to Akobo market to buy items for our businesses.”

This climate of fear contributes to the exclusion of women and girls from economic opportunities, reinforcing cycles of dependency and vulnerability to further abuse or exploitation.

Programmatic Implications for THRIVE

Given the scale and depth of GBV risks across implementation areas, there is an urgent need for THRIVE to integrate comprehensive GBV prevention, mitigation, and response strategies into all programme components. The following actions are recommended:

- **Map and Promote Access to GBV Referral Pathways**
Coordinate with local protection actors to map available services and establish clear, confidential referral pathways. Ensure these are communicated using local languages and through trusted community focal points.
- **Strengthen Access to Safe and Inclusive Spaces**
Where possible, collaborate with partners managing women- and girl-friendly spaces to improve access for THRIVE participants, especially in displacement settings.
- **Integrate GBV Mitigation Across Livelihoods and Services**
Incorporate safety audits and risk assessments into all THRIVE activities, particularly vocational training, agricultural support, and food distribution, to ensure women, girls, and at-risk groups can participate without exposure to harm.

- **Support Community Engagement on Social Norms**
Work with men, boys, and community leaders to raise awareness and challenge harmful norms through dialogue, peer engagement, and culturally appropriate messaging.
- **Facilitate Outreach to Hard-to-Reach Areas**
Explore partnerships or coordination mechanisms to extend GBV services to remote communities through flexible outreach models.

3.2 Child Protection and Early Marriage

Child protection risks are widespread across THRIVE’s implementation areas and are intricately linked with the broader conflict, economic insecurity, and the breakdown of community-based protection mechanisms. The assessment findings indicate high exposure to **early and forced marriage, school dropout, neglect, and child labour**, particularly among girls, children in IDP and returnee households, and those living in rural or insecure settings.

These risks are both direct consequences of displacement and conflict, and also reflect structural drivers, such as poverty, harmful gender norms, and the lack of access to basic services, including education, health, and psychosocial support. Without targeted programming, these risks threaten the long-term safety, development, and rights of children in THRIVE-supported communities.

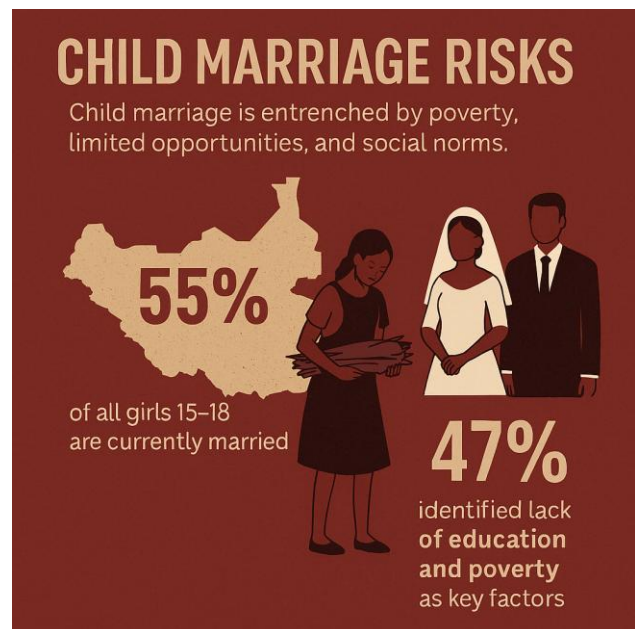
Drivers and Manifestations of Risk - Early and Forced Marriage

Across counties including Fashoda, Renk, and Rubkona, FGDs with women and youth highlighted the prevalence of early and forced marriage as a coping strategy during periods of food insecurity and displacement. Families resort to marrying off their daughters at a young age in exchange for bride price or to reduce the perceived economic burden of large households.

In an FGD with women from Panyikang, participants shared:

“Young girls are traded for money and cattle by desperate parents. There’s no safe place for us,” and “Our culture itself is killing us! Fathers sell daughters for cows as young as 14.”

KIs with civil society actors in Panyikang and Akobo emphasized the absence of legal enforcement mechanisms, leaving girls unprotected from decisions made within the household or community. Survey data confirms these trends, with **29% of respondents indicating that early marriage is either common or increasing** in their area.





Lack of Safe Access to Education

Many communities reported that children, particularly girls, are unable to attend school due to distance, insecurity, or economic pressures. In Panyijiar and Panyikang, participants described the **impact of conflict and displacement on education**, with schools either closed or repurposed for displacement shelters. As a result, children are often left unsupervised or required to engage in income-generating activities.

Survey responses revealed that **44% of households have one or more children not currently attending school**. Reasons cited include lack of security, absence of female teachers, and expectations that children contribute to household labour.

FGDs also highlighted **parental fear of assault or harassment** on the way to school, especially for girls, as a major deterrent to school attendance. In Panyikang, one mother stated:

“Just last week, three schoolgirls were attacked on their way home from class.”

The analysis also found high rates of child labour and family separation, particularly among IDP and returnee households. In Rubkona, KII respondents described children being sent to urban areas to work as domestic workers or labourers. FGDs in Akobo and Renk revealed instances where adolescent boys were sent to work in fishing or charcoal markets, often in dangerous or exploitative conditions. I

In addition to boys being engaged in child labour, there were also references to recruitment of boys and young men into armed groups. One KII informant explained that boys join armed groups because there is no work. An FGD in Fashoda elaborated on this, with participants explaining, *“Lack of jobs and opportunities leads to frustration and violence. Young men are easily recruited into armed groups.”*

This vulnerability is compounded by the fact that **community-based protection systems have weakened**, and **government-led child protection services are nearly absent** in most rural areas. Respondents frequently noted the absence of social workers, lack of family tracing services, and little to no access to psychosocial care for separated or at-risk children.

Programmatic Implications for THRIVE

Given the scale of risk and the limited protective environment, the following actions are recommended to strengthen child protection outcomes:

- **Promote Community-Based Prevention of Early Marriage**
Engage parents, traditional and religious leaders, and youth to challenge the normalization of early marriage and promote alternative coping mechanisms. Build on existing community structures to create safe dialogue spaces and referral points.
- **Support Age-Sensitive Participation in THRIVE Activities**
Design THRIVE livelihood and training components to be flexible and age-appropriate for adolescent participants, particularly girls and displaced youth. This may include life skills, peer mentoring, or early-stage vocational engagement.

- Coordinate on Child Protection Referrals**
 Strengthen coordination with child protection actors to ensure children in high-risk households or displaced environments are identified and referred to appropriate services, including case management and psychosocial support.
- Integrate Child Safeguarding Across THRIVE Activities**
 Apply child protection risk assessments to all programme components, particularly cash, livelihoods, and infrastructure work, to avoid inadvertently exposing children to harm or labour.

3.3 Protection Risks Among Internally Displaced Persons, Returnees, and Persons with Disabilities



Displacement, return, and disability are among the most significant drivers of protection vulnerabilities across THRIVE programme locations. IDPs, returnees, and PwDs face intersecting risks related to exclusion, insecurity, and inadequate service provision. Findings from surveys, KIIs, and FGDs point to systemic discrimination, limited access to basic services, and frequent exposure to both physical and psychological harm.

Marginalization and Discrimination

Displacement and return have fractured traditional support systems and created unequal access to assistance. In FGDs conducted in Rubkona, Renk, and

Panyijiar, participants reported that IDPs, especially those living outside PoC or IDP camps, are often **excluded from food distributions** or **receive lower priority** for services. In Panyikang, an FGD respondent shared:

“If you are from the outside or returned from Sudan, they say you are not part of the list. They give food to those with connections.”

In the survey, over **41% of IDPs and returnees** stated that they had experienced **discrimination or unequal treatment** within their host communities. KII respondents confirmed that **tensions between host populations and returnees** are rising in areas with limited resources, particularly land, water points, and livelihood support.

The data shows that **90% of survey respondents identified displaced populations as being at heightened protection risk**. This reflects a broad recognition of the compounded risks experienced by displaced people, including lack of shelter, insecure tenure, exposure to gender-based violence, disrupted access to services, and exclusion from decision-making structures. FGDs and KIIs further confirmed that displacement not only erodes traditional protection mechanisms but also increases



dependency on overstretched community support systems. In several locations, displaced individuals were reported to face higher levels of harassment, exploitation, and social marginalization.

Lack of Documentation and Protection

Many returnees and displaced households **lack official identification or land tenure documents**, which creates barriers to enrolling in education, accessing legal aid, or claiming humanitarian aid. In Fashoda, community leaders described how land disputes and perceptions of not belonging have led to exclusion of returnee families from services or community resources. Additionally, returnees often expressed unfamiliarity with complaint mechanisms and low levels of trust in authorities, particularly in areas affected by conflict and displacement.

Additionally, returnees are often unfamiliar with current complaint mechanisms or service providers, and express **low levels of trust in police or government representatives**, particularly in formerly contested or insecure areas.

Risks for Persons with Disabilities (PwDs)

Across the six counties, persons with disabilities remain one of the most excluded and underserved groups. FGDs and KIIs consistently highlighted the **absence of inclusive service design**, physical barriers, and a lack of support for mobility or assistive devices.

In the survey, only **12% of PwDs** reported access to specialized services, such as mobility assistance. FGDs noted that PwDs are **often confined to their homes**, unable to travel independently, and left out of community activities and decision-making processes. In Akobo, one male participant shared:

“If you are blind, you don’t go anywhere. There is no help, no path, and no one to take you.”

Social stigma was also frequently cited. In multiple locations, PwDs reported that they are viewed as a burden by their own families and community members. This reinforces a cycle of **dependency, invisibility, and exclusion from livelihood support or protection services**.

Exclusion from Program Targeting

Persons with disabilities (PwDs) are regularly overlooked in humanitarian programming despite their clear protection needs. KIIs in Rubkona and Panyijar described how PwDs face systemic barriers to accessing services and are often excluded from planning and outreach. A local government official in Rubkona noted that PwDs frequently experience discrimination and are left out of service delivery and economic opportunities, while in Panyijar, PwDs were described as being neglected in daily life and unsupported by current protection systems. Across counties, FGDs also highlighted that PwDs are rarely consulted in community decision-making processes or included in registration or distribution exercises

Programmatic Implications for THRIVE



These findings underscore the urgent need for THRIVE to prioritize displacement-sensitive approaches within its protection strategy, ensuring targeted outreach, tailored services, and inclusive governance structures that reflect the realities of displaced populations.

- **Strengthen Inclusion in Targeting and Outreach**
Ensure that THRIVE assessments and beneficiary registration tools include disaggregated data on displacement and disability. Actively engage returnee leaders, PwD organizations, and IDP committees in targeting exercises.
- **Enhance Community Dialogue and Social Cohesion**
Promote inclusive dialogue sessions between host, displaced, and returnee communities to address underlying grievances and ensure equitable access to resources and services.
- **Support Mobile Outreach and Home-Based Services**
Where individuals are unable to access services due to mobility, explore options for coordinated outreach or localized delivery in collaboration with protection partners.
- **Build Staff and Partner Capacity on Inclusion**
Train THRIVE staff, volunteers, and implementing partners on disability rights, inclusive communication, and the identification of protection risks among IDPs and returnees.
- **Integrate Inclusion into Livelihoods and Infrastructure Activities**
Ensure any infrastructure linked to livelihoods or training (e.g., workspaces, distribution sites) is designed with accessibility in mind, and that PwDs and displaced households are not inadvertently excluded from THRIVE-supported opportunities.

3.4 Access to Protection Services and Complaint Mechanisms

Access to protection services and effective complaint mechanisms is essential for safeguarding the rights, safety, and dignity of at-risk populations. However, the assessment revealed that in the THRIVE implementation areas, access remains **limited, inconsistent, and highly unequal**, particularly for women, IDPs, returnees, persons with disabilities (PwDs), and adolescent girls. Barriers include weak service presence, lack of trust in available pathways, logistical constraints, and a general lack of awareness about where or how to seek help.

The absence of accessible, confidential, and survivor-centred reporting and referral structures undermines community protection, particularly in remote, underserved, or recently resettled areas.

Limited Awareness and Low Usage of Existing Mechanisms

Survey data shows that only **35% of respondents** knew where to report protection-related incidents. Of those who did know, the majority referenced **community leaders (chiefs or elders)** or **local authorities**, rather than humanitarian agencies or formal protection services.



Respondents frequently cited that **NGO services were either unavailable or not well-communicated**. In Panyikang and Rubkona, FGDs noted that **only those inside IDP or PoC sites** seemed to benefit from complaint hotlines, awareness campaigns, or legal aid, leaving host and rural populations effectively excluded.

Lack of Confidentiality and Trust

Both women and adolescent girls expressed a deep mistrust of formal and informal complaint pathways, especially when it comes to sensitive protection issues such as GBV, early marriage, or exploitation by authority figures. In Panyikang and Renk, respondents reported that cases disclosed to elders or chiefs were rarely resolved confidentially and often led to pressure for reconciliation rather than justice.

This is further compounded by a lack of female service providers and inadequate survivor-centred training among community-based actors. In Fashoda, a female participant noted:

“If the chief knows, the whole village will know. They talk and blame the girl. So we keep silent.”

KIIs with NGO staff and health workers confirmed that there are few trained protection focal points outside of larger urban centres, and very limited documentation or referral tracking.

Geographical and Structural Barriers

The physical environment in many counties, marked by poor roads, seasonal flooding, and limited telecommunications, poses major challenges to accessing complaint and protection systems. Survey data showed that:

- 47% of respondents said they would need to walk more than an hour to reach any service point.
- 32% of respondents said they were “not sure” if a complaint would ever be followed up once reported.

In Fashoda, Rubkona, Panyikang and Panyijiar, FGDs and KIIs confirmed that many women rely on informal resolution mechanisms, or none at all, because formal systems are too far or too delayed to be effective. A key informant in Fashoda explained, *“Traditional customs sometimes condone GBV by restricting reporting mechanisms and delaying justice,”* while FGD respondents from Panyikang said, *“When we report rape cases, the police ask for bribes.”*

Gaps in Protection Awareness

Only 35% of community members know where to report protection cases

47% said they would need to walk more than an hour to reach a service point

32% were unsure if any complaint would be followed up



While protection risks were reported across all locations, the nature of those risks varied by setting. In more **rural locations** such as Panyijar and Fashoda, isolation, lack of services, and reliance on traditional mechanisms left many survivors with no trusted pathways to report abuse or seek help. Women described long travel distances to water points, markets, or health facilities, often without protection infrastructure. In contrast, **urban/semi-urban areas** like Rubkona, Akobo, Renk, and Panyikang (Malakal PoC) saw higher service presence but also reported risks linked to overcrowding and harassment within camps or public spaces. While some participants in these settings were aware of complaint mechanisms, fear of retaliation, corruption, and stigma still discouraged reporting. These findings highlight the need for context-specific protection strategies that account for both physical access and social trust.

Opportunities for Strengthening Protection Access

Despite these challenges, the assessment also identified **community-based protection actors**, **women's groups**, and **youth committees** as potential entry points for localized accountability mechanisms. In several counties, informal groups expressed willingness to receive training or support to act as **focal points for safe disclosure**, provided they are equipped with guidance, tools, and supervision.

In Rubkona and Akobo, respondents suggested **anonymous suggestion boxes** or **designated help desks during distributions** as trusted alternatives, particularly for women, girls, and displaced persons.

Programmatic Implications for THRIVE

To ensure protection risks are identified and addressed in a timely, confidential, and inclusive manner, THRIVE should consider the following actions:

- **Develop and Map Localized Complaint and Feedback Mechanisms**
Design systems that are simple, inclusive, and adapted to low-literacy and resource-constrained settings. Ensure complaint points are physically and socially accessible to marginalized groups.
- **Build Trust Through Training and Engagement**
Train local authorities, volunteers, and service providers on confidentiality, referral procedures, and safeguarding principles. Ensure that community actors understand how to safely handle disclosures.
- **Promote Gender-Sensitive Service Delivery**
Where possible, encourage the recruitment and visibility of trained female staff in frontline roles to support safe reporting and survivor-centred services.
- **Leverage Mobile and Remote Tools**
Where infrastructure is lacking, explore the use of mobile phones, community radios, or trusted focal persons for safe and anonymous reporting.
- **Institutionalize Feedback Loops**



Regularly report back to communities on how complaints are handled and what actions were taken. This increases confidence in the system and encourages future use.

3.5 Institutional Capacity, Coordination, and Safeguarding

Effective protection programming in fragile and displacement-affected settings depends on the strength of institutional structures, coordination systems, and safeguarding frameworks. Across the THRIVE implementation areas in South Sudan, the assessment identified **gaps in institutional capacity, fragmented coordination, and inconsistent application of safeguarding principles**, particularly at the community and frontline service levels. These challenges weaken the ability of both governmental and non-governmental actors to respond to protection needs in a timely, consistent, and survivor-centred manner.

At the same time, local leadership structures, women's groups, and community-based actors remain important, albeit under-resourced, assets in the protection landscape.

Weak Protection Infrastructure and Service Capacity

Across all counties, KIIs revealed that **government-led protection services remain extremely limited**, particularly outside urban centres. State ministries of gender, child, and social welfare operate with minimal staffing, limited transportation, and irregular funding. In counties like Panyikang, Fashoda, and Panyijar, there were no operational social workers or child protection officers during the assessment period. In these locations, community members reported relying on overstretched health workers, traditional leaders, or no formal support at all in response to child protection or GBV cases.

Health facilities that could serve as entry points for GBV case management or psychosocial support lack trained staff and often operate without consistent referral protocols. This situation is particularly acute in areas experiencing seasonal displacement or where infrastructure has been damaged by flooding or conflict.

In Fashoda, a local official noted:

“There is no office for social affairs here. If there is a case, they say to wait for Juba to respond. But by then, it is too late.”

Coordination Gaps and Lack of Standardized Referrals

Protection coordination among humanitarian partners is active in central, urban locations, yet **coordination mechanisms are far weaker at the county and payam levels**. Across multiple counties, KIIs with local leaders and FGDs with community members indicated that survivors of GBV often lacked access to clear referral pathways. Where services existed, they were rarely coordinated or well-communicated, leading to confusion or delays in accessing support. No formal inter-agency protocols were mentioned by any participants.

Moreover, data sharing and follow-up mechanisms are rarely standardized, and many frontline actors lack clarity on who to contact for legal aid, psychosocial support, or emergency shelter. In Akobo and Renk, organizations described protection coordination groups that had not met in several months due to access constraints or shifting priorities.

Safeguarding Practices: Policy vs. Practice

While most implementing agencies reported having **safeguarding policies on paper**, many KIIs revealed that **these are not consistently understood or applied at the field level**. Local volunteers and enumerators often receive limited training on safeguarding, disclosure procedures, or child protection protocols.



Further, in FGDs, community members were not aware of **codes of conduct** or whether staff from THRIVE or partner organizations had signed **Protection from Sexual Exploitation and Abuse (PSEA)** commitments. Across locations community members reported low awareness of staff codes of conduct and available complaint mechanisms.

Opportunities for Local Engagement and Capacity Strengthening

Despite these institutional gaps, the assessment identified strong interest among community-based actors, such as youth groups, women's associations, and church-led networks, to engage more actively in protection work. However, they cited the need for training, supervision, and clearer linkages to formal service providers.

In Renk and Akobo, youth leaders suggested establishing **community protection committees** trained in basic protection monitoring and referral, supported by NGOs and local authorities. Female leaders emphasized the importance of including women and PwDs in these structures to ensure that local risk assessments are truly inclusive.

Programmatic Implications for THRIVE

To ensure effective protection outcomes and strengthen institutional responsibility, THRIVE can consider the following strategic investments:

- **Strengthen Local Protection Capacity**
Partner with county-level ministries and community structures to build the capacity of frontline workers and referral actors in GBV case management, child protection, and PSEA.
- **Support Decentralized Protection Coordination**



Revitalize protection working groups at the county and payam levels and ensure clear terms of reference, membership, and information sharing protocols across sectors.

- **Train All Staff and Partners on Safeguarding**

Develop and roll out mandatory safeguarding and PSEA training for all THRIVE-affiliated staff, including field volunteers and incentive workers.

- **Institutionalize Safe Reporting Channels**

Ensure all THRIVE activities integrate accessible and confidential mechanisms for reporting abuse, misconduct, and rights violations. This includes establishing clear response pathways and regular follow-up procedures.

- **Promote Local Ownership and Leadership**

Support the formation or reinforcement of community-based protection structures, ensuring that women, youth, and marginalized groups have active roles in protection planning and monitoring.

4. CONCLUSION AND RECOMMENDATIONS

The THRIVE Protection Risk Assessment provides a comprehensive overview of the vulnerabilities and protection challenges experienced by communities across six counties in South Sudan: Rubkona, Renk, Fashoda, Panyikang, Panyijar, and Akobo. It **highlights the intersection of protection threats with gender, displacement, age, and disability, revealing how systemic inequalities, conflict-related displacement, and climate-induced hardship continue to erode the safety and dignity of already at-risk groups.**

The findings demonstrate that **gender-based violence remains widespread and underreported, child protection systems are weakened, and displaced populations and persons with disabilities are often excluded** from services and decision-making processes. Barriers to accessing protection services, including distance, stigma, lack of information, and limited institutional presence, further compound these risks. While formal state protection mechanisms remain weak or absent in many areas, community-based structures have the potential to be engaged more effectively in localized responses if properly trained and resourced.

The assessment also revealed clear differences between rural and urban settings in the nature of protection risks. In rural areas, lack of physical access to services and social isolation heighten vulnerability, while in urban and PoC settings, risks often stem from overcrowding, tensions surrounding unequal aid access, or harassment in public spaces. These divergent realities underscore the importance of locally adapted protection approaches.

Finally, the assessment reveals opportunities for meaningful impact. Communities expressed a strong willingness to engage in protection activities and identified practical ways to strengthen inclusion and accountability. Women's groups, youth leaders, and local authorities indicated readiness to serve as focal points for complaint handling, referrals, and awareness raising, demonstrating both ownership and commitment. By investing in these capacities, the THRIVE programme can support a more localized, inclusive, and sustainable protection environment.



4.1 Recommendations

The recommendations presented here aim to guide the strategic integration of protection into THRIVE's implementation. They are framed around immediate priorities and medium-term capacity-building measures.

1. Mainstream Protection Across Programme Delivery

- Apply a protection lens to all THRIVE components—livelihoods, cash transfers, training, and resilience building—to avoid exacerbating existing risks.
- Conduct protection risk assessments during program design and major adaptations to ensure early identification of vulnerable individuals.
- Use protection-related indicators and disaggregated monitoring data to assess how program interventions affect the safety and dignity of beneficiaries.

2. Enhance GBV Prevention, Mitigation, and Response

- Coordinate with local protection actors to strengthen GBV referral pathways and increase awareness of survivor-centered services through community outreach.
- Support coordination efforts with health, legal, and psychosocial service providers to map and improve existing multi-sectoral referral pathways.
- Develop tailored **community awareness campaigns** targeting men, youth, and religious/traditional leaders to address social norms and reduce stigma.

3. Reinforce Child Protection Systems

- Support the formation or strengthening of **community-based child protection committees**, with training on early marriage prevention, child labour, and referral procedures.
- Engage youth groups, parents, and local leaders in community-driven child protection efforts, including awareness on early marriage and safeguarding practices.
- Integrate child safeguarding into all THRIVE platforms, including vocational training, food distribution, and public works.

4. Promote Inclusion of IDPs, Returnees, and PwDs

- Ensure that **beneficiary selection and needs assessments** explicitly include displacement and disability status.
- Partner with community leaders to resolve tensions between host and returnee populations through inclusive dialogues and shared resource planning.



- Explore outreach or flexible service delivery models to improve access for remote or homebound individuals, especially persons with disabilities.

5. Strengthen Community-Based Complaint and Feedback Mechanisms

- Establish trusted, **accessible complaint channels**, including in-person focal points, suggestion boxes, and mobile phone-based systems.
- Ensure protection complaints are handled by trained focal points with an understanding of safeguarding and confidentiality.
- Provide **feedback loops** to communities to build trust and demonstrate that concerns are heard and acted upon.
- Conduct regular community feedback activities, including focus group discussions, to identify protection risks and improve complaint mechanisms.

6. Build Institutional Capacity and Safeguarding Systems

- Convene **county-level coordination platforms** to improve protection referrals, information sharing, and accountability.
- Strengthen safeguarding systems through training, internal SOPs, and refresher sessions for THRIVE staff and relevant partners.
- Conduct **community outreach on safeguarding and PSEA**, ensuring beneficiaries know their rights and where to report misconduct or abuse.