



WHO delivering prepositioned drug supplies in Marial Bai Primary Health Care Center, Northern Bahr El Ghazal.

South Sudan

Emergency type: Humanitarian Crisis in South Sudan



7 MILLION
NEED
HUMANITARIAN
ASSISTANCE



1.74 MILLION
INTERNALLY
DISPLACED



2.47
MILLION
REFUGEES

MEDICINES DELIVERED TO HEALTH FACILITIES/PARTNERS

61 ASSORTED MEDICAL KITS AND SUPPLIES

WHO FUNDING REQUIREMENTS 2018



3.9M FUNDED
16.9M REQUESTED (UNDER 2018 HRP)

MALNUTRITION

261 424 CHILDREN ESTIMATED TO BE SEVERELY MALNOURISHED

55 FUNCTIONING STABILIZATION CENTERS ACROSS COUNTRY

VACCINATION 2018



522 901 OCV DOSES DEPLOYED IN 2018

1 950 955 # OF CHILDREN (6-59mths) VACCINATED AGAINST MEASLES

1 784 766 # OF PERSONS VACCINATED AGAINST MENINGITIS

RIFT VALLEY FEVER



58 TOTAL SUSPECTED HUMAN CASES

HIGHLIGHTS

- Oral Cholera Vaccination campaign targeting 40,000 people commenced on 12 July 2018 in Leer county. The campaign is led by Medair and WHO provided the vaccines and technical expertise.
- More than 31,500 people in Wau, Western Bahr el Ghazal remain displaced from their homes. Partners continue to provide support to displaced, host and returnee communities across Wau while extending humanitarian assistance to families affected by recent insecurity in mid-June 2018
- On 4 July 2018, UN Agency contracted trucks (clearly marked with organization logo) were ambushed by unidentified armed men near Mangala in Terekeka County. One truck driver was killed. Attacks on humanitarian convoys and personnel have been frequent in South Sudan's conflict and both warring sides have been blamed. At least 107 aid workers have been killed in the country since the war started in December 2013.
- The Humanitarian Coordinator for South Sudan, on 12 July 2018 led a delegation of humanitarian organizations to Tambura in Western Equatoria to observe the needs and response to 18,000 IDP recently displaced to the area.

Background of the crisis

- The humanitarian situation in South Sudan remains volatile and unpredictable since the beginning of the crisis now in its 4th year. Efforts at bringing together the warring parties are still ongoing in neighbouring countries with little progress. The UN Security Council has imposed arms embargo on South Sudan with the aim of pressuring the warring parties to accelerate peaceful solution. In the meantime, fighting continues.

Event Description/ Situation update

- The alarming rate of food insecurity levels in the country Partners continue to be emphasized, where according to the February 2018 IPC by the end of July more than 7.1 million people could be severely food insecure in the absence of sustained humanitarian assistance
- UN Human Rights monitors have documented what appear to be deliberate, ruthless and brutally violent attacks on civilians, particularly against women and children, by Government and aligned forces, as well as armed youth in parts of Unity in South Sudan. A report issued on 10 July 2018 documents acts that constitute gross violations and abuses of international human rights and humanitarian law – that may amount to war crimes. The investigation has also identified three individuals who may bear the greatest responsibility for the violations committed. Between 16 April and 24 May 2018, at least 232 civilians were killed and many more injured in attacks by Government and aligned forces and armed youth on 40 villages in the opposition-held areas of Mayendit and Leer counties. (Read the full report: <https://bit.ly/2unv0iu>)

- **Insecurity and attacks:**

Eighteen people were killed and 14 others injured during the inter-communal fighting between the Murule and Jie ethnic groups in Nawuyapuru, Jonglei in revenge for a previous cattle raid.

Access to Baggari, Besselia and Bazia payams in Wau county still prohibited due to the fighting between SPLA and armed group in these locations. On 4 July 2018, UN Agency contracted trucks (clearly marked with organization logo) were ambushed by unidentified armed men near Mangala in Terekeka County. One truck driver was killed. Attacks on humanitarian convoys and personnel have been frequent in South Sudan's conflict and both warring sides have been blamed. At least 107 aid workers have been killed in the country since the war started in December 2013.

On 4 July 2018, fighting was reported between SPLA and SPLA-iO forces in Bieh in Koch County. Several civilians were reported to have fled to the swamps due to safety concerns.

On 10 July 2018, a youth group in Malakal PoC gave one-week ultimatum to aid workers from the Equatoria region to leave the PoC or bear consequences. In a letter to partners the youth group alleged that all the jobs with humanitarian organizations are taken by the Equatorians. Some NGO advised their staff members from Equatoria region not to go to the PoC site due to safety concerns, as they follow up with the IDP leadership to discuss and resolve this issue.

- **Population displacement:**

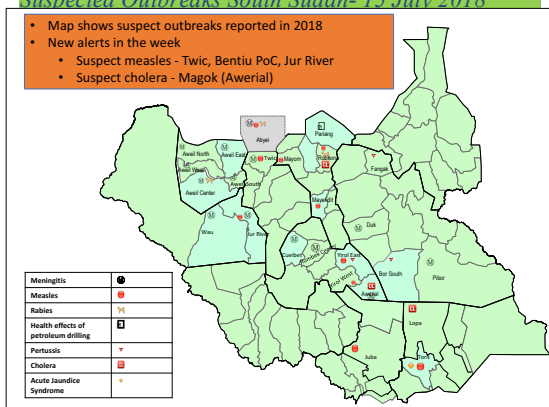
The Humanitarian Coordinator for South Sudan, on 12 July 2018 led a delegation of humanitarian organizations to Tambura in Western Equatoria to observe the needs and response to 18,000 IDP recently displaced to the area. The delegation met with the Governor of Tambura, local authorities, community leaders, aid organizations, as well as displaced women and children who expressed their desire to return home once the fighting stops.

More than 31,500 people in Wau, Western Bahr el Ghazal remain displaced from their homes. Partners continue to provide support to displaced, host and returnee communities across Wau while extending humanitarian assistance to families affected by recent insecurity in mid-June 2018.

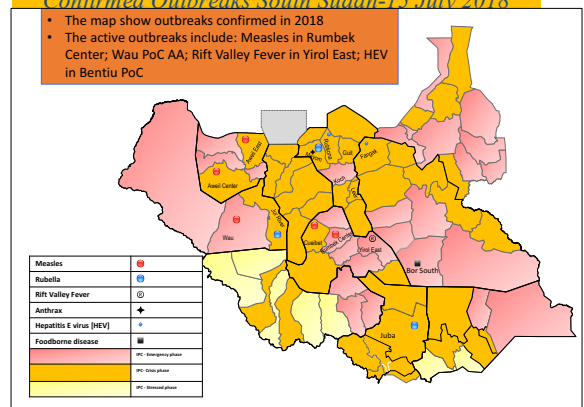
On 14 July 2018, partners reported presence of over 7,000 IDP who have fled their homes out of fear due to increased and consistent movements of opposition forces in the Ezo county, Western Equatoria State.

- In epidemiological week 27 of 2018, completeness and timeliness for IDSR reporting at county level was 74% while EWARS reporting from the IDP sites was 82%. In this reporting period, a total of 7 alerts were reported, of which 71% have been verified and none required a response. Measles was the most frequently reported alert.

Suspected Outbreaks South Sudan- 15 July 2018



Confirmed Outbreaks South Sudan-15 July 2018



- Malaria:** In week 27 of 2018, there were 46 517 cases (66% of the total consultations) of malaria reported. The cumulative total of 1 025 897 (54%) cases and 138 deaths have been registered since week 1 of 2018. In the relatively stable states, malaria is the top cause of morbidity accounting for 40% of the consultations in week 27.
- Rift Valley Fever:** During the reporting week, there were no new suspected cases reported. However, enhanced surveillance is on-going. From the beginning of outbreak a total of 58 suspect human cases including 6 confirmed have been reported. Nine confirmed animal cases (cattle).
- Animal bites - Suspected Rabies:** A total of 9 animal bites were reported and treated in Bentiu PoC, Abyei town, and Aweil town. The cumulative total of 263 cases of animal bites including 4 deaths reported in Bentiu PoC since 6 December 2017 and 595 have been reported in Agok hospital, Abyei Town in 2018. A comprehensive response that includes post exposure vaccination, community mobilization and education to minimize the risk of dog bites, dog vaccination, sterilization and culling is underway.
- Measles:** New alerts were reported in week 27 include suspected measles in Twic, Bentiu PoC, & Jur River. In Twic county, five suspected cases were investigated and samples obtained for laboratory testing. In Jur River county - Wau Bai payam, Awany village, 6 suspected cases were investigated. In Bentiu PoC, another suspected case was reported making the total 6 (most cases from Sector 6). Currently there is no laboratory reagent in the country to process measles samples.
- Hepatitis E (HEV):** The HEV outbreak is still ongoing in Bentiu PoC. During the reporting week, a total of 12 new suspected cases were reported and all tested negative. Cumulatively, a total of 128 suspect cases (15 confirmed by PCR) have been reported. Current response entails surveillance, case follow up, WASH and discouraging communities from using stagnant water for domestic and recreational purposes.
- Visceral Leishmaniasis| Kala-azar:** In week 27, eight health facilities reported 27 cases with one death reported. Since the beginning of 2018, a total of 1,493 cases including 38 deaths (CFR 3%) have been reported from 39 health facilities. Of the 1 493 cases reported, 1138 (76%) were new cases, 71(5%) PKDL and 284 (19%) relapses. In the corresponding period in 2017, a total of 1 927 cases including 33 deaths (CFR 2%) and 61 (3%) defaulters were reported from 21 treatment centers.

WHO Public Health response

- Oral Cholera vaccination campaign targeting 40,000 people (excluding Leer Town & TPA where the campaign was completed) commenced on 12 July 2018 in Leer County. The campaign is led by Medair and WHO has provided the vaccines and technical expertise.



WHO team processing the supplies for repositioning countrywide

- WHO conducted a training on adverse event following immunization (AEFI) for 41 participants who included State EPI officers, medical officers and nurses from state hospitals, EPI Manager and staff from national EPI team, medical officers from Juba hospital, Drugs and Food Control Authority and representatives from JSI, WHO and UNICEF, to strengthen surveillance mechanism for AEFI.
- The mass Measles vaccination campaign within Wau municipality started on Tuesday 10 July, the campaign targeted 56,072 children from 6-59 months, and was extended for another 2 days to run for 7 days until 15th July 2018 instead of the initial planned 5 days.
- An inter cluster assessment for IDPs displaced from Wathalelo village due to skirmishes between SPLA & armed forces was conducted in Umbili & Barwol villages in Jur River county in Wau on 11th July 2018. WHO delivered emergency drugs supplies to Umbili Health facility.
- In readiness for the VRAM data collecting field exercise, WHO in collaboration with the Ministry of Health refined the indicators and developed the questionnaire.
- As part of the EVD preparedness following the outbreak declared in neighboring DRC on 8 May 2018, WHE is running a series of 5 EVD trainings introducing the basics of EVD, IDSR, IHR, RRT, EVD screening and triage, IPC, contact tracing, PPE, laboratory diagnosis and case management. One training in Yei was conducted 2 weeks ago and four remaining priority locations of Juba, Yambio/Tambura, Nimule and Maridi will be conducted this month.

- The Public Health Emergency Operations Centre (PHEOC), constructed by WHO with support from the Government of Japan was finally opened and hosted the first and second weekly EP&R meetings chaired by MoH, on 4 and 11 July, 2018 respectively. The equipment installation



The Emergency preparedness and response meeting hosted at the PHEOC in Juba

has been completed, and the IDSR team and EOC manager (MoH EP&R Director) already relocated to work at the facility. The official launch and handover of the facility to MoH is planned in the coming weeks once the testing of the audio and video conferencing equipment is completed.

Operational gaps and challenges

- The continued enhanced conflict in areas of Greater Upper Nile and Unity have rendered many people IDPs and have made humanitarian workers to have little access to them. This has led to humanitarian workers pushing for 21 days of tranquility where the belligerents would stop fighting and aid can reach the most deserving.
- The generalized food insecurity where four counties are in IPC 5 (Leer, Mayendit, Koch and Renk) have put the population in this areas at high risk of mortality and morbidity from Malaria which is expected to increase.
- The high inflation rate in the country has led to prices of basic food commodities to skyrocket.
- There is currently a shortage of reagents for measles and rubella testing in the National Public Health Laboratory. This has constrained testing of suspect measles cases with potential delays in responding to new measles outbreaks.

Resource mobilization

- **Financial Information:** The total recorded contributions for WHO emergency operations amounts to US\$ 3.92 million for the financial year 2018 as of 30th June 2018. WHO is grateful for the critical support provided by donors who have contributed to this operation as well as those who have contributed to WHO programmes with un-earmarked and broadly earmarked funds. Efforts for mobilization of additional resources are ongoing.
- WHO submitted a concept note to OFDA titled “stopping malaria child mortality exacerbated by acute malnutrition; field testing of WHO-recommended emergency interventions against malaria in South Sudan”. Given the gravity of the situation WHO recommends the following new, additional emergency interventions for which urgent funding of USD 1.744 million is required: Scaling up the integrated preventive treatment pregnant women (IPTp) as nation-wide as possible, integrated preventive treatment of all children (IPTi) under the age of 1, monthly age-targeted Mass Drug Administration (MDA) for all CU5 at highest risk of malaria mortality, provision of operational funds and reserve stocks in anti-malarial drugs and supplies for indoor residual spraying (IRS) of insecticide.
- WHO will submit to DFID two expression of interest papers concept notes on research for health in humanitarian crises. The two include cost benefit analysis of iCCM in South Sudan for the past five years, and evaluation of approaches to prevent, respond to and contain cholera epidemics in South Sudan. If accepted, then full proposals will be written for 12 months projects.
- The country office is also in the process of completing a proposal for ECHO for supplementary funding at a cost of €500,000 for strengthening EWARS surveillance among IDPs for a period of 12 months.
- WHO is working on a concept note on expansion of blood transfusion services to 14 Comprehensive Emergency Obstetric and Newborn Care (CEmONC) centres and operational support to the newly established national Public Health Emergency.

FUNDING STATUS OF APPEALS US\$				
	NAME OF THE APPEAL	REQUIRED FUNDS	FUNDED	% FUNDED
WHO	Humanitarian Response Plan	US\$ 16.9 million	US\$ 3.92 million	23%

The operations of WHO in South Sudan are made possible with generous support from the following donors:



From
the People of Japan



South Sudan
Humanitarian
Fund



European Union
Civil Protection and
Humanitarian Aid



USAID | SOUTH SUDAN
FROM THE AMERICAN PEOPLE



United Nations | Central
Emergency
Response
Fund
CERF

For more information please contact:

Mr Evans Liyosi

WHO Country Representative a.i.

Email: liyosie@who.int

Mobile: +211 916 743 301

Dr Guracha Argata

Emergency Coordinator

Email: guyoa@who.int

Mobile: +211 926144384

Ms Liliane Luwaga

Communications Officer

Email: luwagal@who.int

Mobile: +211 921 647 860