

South Sudan: Bi-Weekly Humanitarian Situation Report

Emergency type: Humanitarian Crises

Issue 21 | Date: 01- 15 January 2021

KEY FIGURES

7.5M People in Need of Humanitarian Assistance	2.24M South Sudanese Refugees in neighbouring countries
1.6M Internally Displaced	1.4M Malnourished Children
125K Persons living in PoC ¹	483K Malnourished Women
73 Stabilization Centers	5.82M Severely Food Insecure

COVID-19

3 865 confirmed cases	64 deaths	85 543 Tests performed	3596 recoveries
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FLOODS

1 034 000 people affected	485 000 Displaced	4 Deaths
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HIGHLIGHTS

- A cumulative of 3 865 COVID-19 confirmed cases and 64 deaths (case fatality rate of 1.7%) have been reported in South Sudan since the confirmation of the outbreak.
- Over 100 000 people will be in acute food insecurity (catastrophe) IPC Phase 5 in the first quarter of 2021 across six counties: Pibor, Akobo, Aweil South, Tonj East, Tonj North, and Tonj South.
- WHO supported four stabilization centres in severely food insecure counties of Pibor, Akobo, Tonj North and Aweil South with severe acute malnutrition with medical complication (SAM/MC) kits for treatment of 250 malnourished children with medical complications for a period of three months.
- A total of 317 Interagency Emergency Health Kits (IEHK), enough to support 319 000 people, have been prepositioned in WHO state offices (Bor, Aweil, and Kuajok) to support health partners responding to food insecurity in the prioritized counties.

121 066 (20%)	Children under one year vaccinated with oral polio vaccine
962 158	Initial numbers of children vaccinated against measles
2	Counties with confirmed measles outbreaks in 2021
0	PoC ¹ s sites with confirmed measles outbreaks in 2021
1	Counties with malaria cases surpassing their set thresholds



Interagency Emergency Health kits prepositioned in Aweil ready for distribution to health facilities and partners in Aweil South

¹ UN Protection of Civilians'

Overview of the Humanitarian Crisis

- **Insecurity in Central Equatoria (Lanya and Kajo Keji)**

Insecurity incidents have been reported in both Lanya and Kajo Keji counties. In Lanya, over 9 100 individuals are congregated in Limuro, Wuji Payam of Lainya County after being displaced following fighting between the two Mundari communities from Tali and Tindilo. In Kajo Keji, recurrent insecurity have resulted in displacement of IDPs from Koriyo IDP camp and relocation of 7 300 (1255 households) to newly created makeshift IDP camp on 18 January 2021, and suspension of humanitarian activities by partners. Additional relocations to the new camp are being organized for both IDPs and host community members. The new IDP site is reported to lack basic services such as adequate water supply and sanitation, health, emergency food and ES/NFI. Health response for displaced population in Lanya has begun after WHO donated assortment of emergency drugs and supplies.

- **Food Insecurity in South Sudan in 2021**

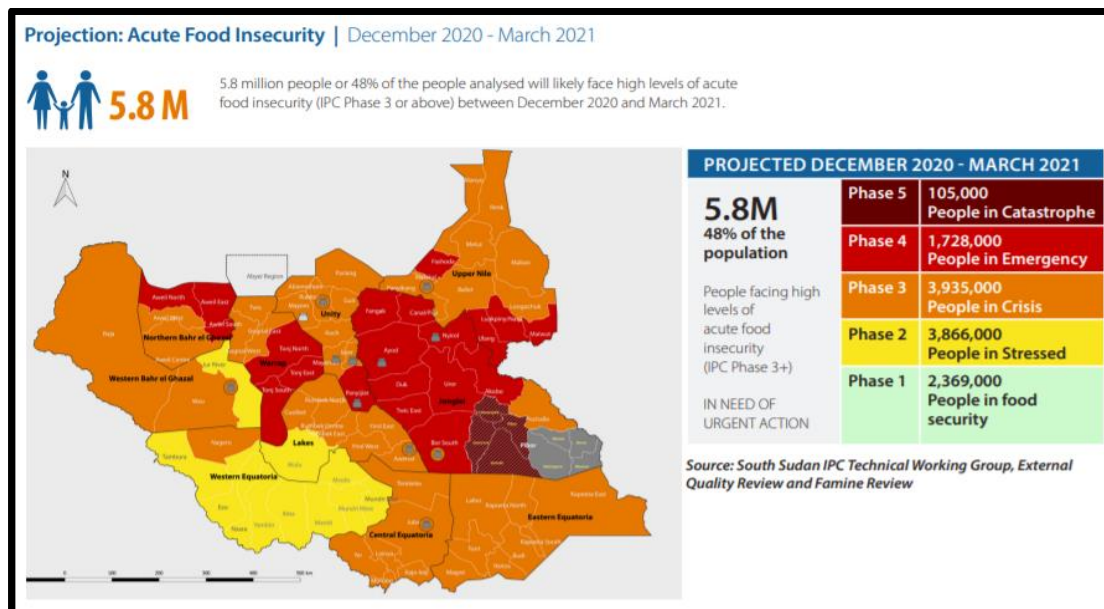
The Integrated Food Security Phase Classification (IPC) report released in December 2020 estimated that 5.8 million people (48% of population) in South Sudan will face high levels of acute food insecurity (IPC 3 or worse) between December 2020 and March 2021. The number of food insecure people is expected to grow up to 7.2 million (60% of the population) between April and July 2021. The IPC report further reported a dire humanitarian situation in six counties namely Pibor, Akobo, Aweil South, Tonj East, Tonj North, and Tonj South; where communities are expected to experience high levels of severe acute food insecurity (IPC Phase 5, catastrophe) and acute malnutrition.

Over 100,000 people will be in catastrophe (IPC 5) across the six counties between December 2020 to July 2021 according to the IPC findings. In Pibor, where there is likelihood of famine, over 30% of children between the ages of 6 months to 5 years are suffering from acute malnutrition, which is above the emergency threshold recommended by WHO. The number of counties in IPC3 and 4 emergencies is expected to reach 46 compared to only 28 in 2019.

The severe food insecurity in those counties is said to be exacerbated by several factors: sub-national violence and insecurity incidents that have resulted in population displacement and disruption of social services, impact of flooding on livelihood, macroeconomics crisis and impact of Covid-19 restrictions and measures leading to high food prices, lack of access to markets, and public health factors such as disease outbreaks, unavailability and low utilisation rate of health, WASH and nutrition services. Tonj North continues to experience as 4 400 people were displaced into Gogrial west county.

The severe acute food insecurity will negatively impact the health of the affected communities through increased infectious diseases transmission due to insufficient macro- and micro-nutrient intake, with consequent decline in immunity. Children, pregnant and lactating women, and people living with HIV will be disproportionately affected, in famine scenarios the impact extend to the general population.

Immediate scaling up of a multi-sectoral response has begun focusing on providing food and livelihoods assistance, health and nutrition support, protection services, logistics and Water, Sanitation and Hygiene (WASH) support to the most vulnerable people including over 300,000 children suffering from severe acute malnutrition and some 480,000 pregnant or breastfeeding women who are acutely malnourished and in need of treatment.



Emergency Response Activities

Health Cluster response in IPC Phase 5 counties

- Health Cluster partners are scaling up the provision of the essential primary health services including management of the common outpatient conditions, vaccination, maternal and child care, and management of severe acute malnutrition cases with medical complications through static and mobile health units in the affected locations as well as enhancing infectious disease surveillance and alert verification and investigation.
- As part of outbreak prevention activities, 57 960 (62% coverage) individuals were vaccinated against cholera in the Greater Pibor Administrative Area (GPAA) in the first round of cholera campaign which began on 16 January 2021. In addition, 22 184 (123%) children <5 years of age were vaccinated against measles in GPAA and is expected to protect children from the deadly compounding effect of measles infection and malnutrition.
- WHO supported four stabilization centres in Pibor, Akobo, Tonj North and Aweil South with severe acute malnutrition with medical complication (SAM/MC) kits for treatment of 250 malnourished children with medical complications for a period of three months and early childhood development (ECD) kits for psychosocial and motor stimulation of 100 malnourished children. In addition, 317 IEHK kits have been prepositioned in WHO state offices (Bor 66, Aweil 30, and Kajok 221) to support health partners responding to food insecurity in the prioritized counties and the kits are expected to support about 319 000 individuals for a period of three months.

Update on floods and response

- Health partners continue to respond in the affected locations. Water levels receding in many floods affected locations. However, access impediments persists in Pibor, Nyirol, Ayod and Fangak
- Fresh flooding reported in parts of Unity (Panyijjar, Guit and Koch). In Panyijjar, an implementing health partner had earlier been expelled by the community but later the issue was resolved through engagement.
- Response gap in provision of emergency shelter and non-food items (ES/NFI) has been reported in Mundri East and Mundri West where 20 000 IDPs are awaiting emergency shelter materials.

Performance of the Integrated Disease Surveillance and Response (IDSR)

- In week 02, 2021 IDSR reporting completeness and timeliness were 90% and 74% respectively at

Surveillance, Epidemiological Update, and

Response for Disease Outbreaks

the health facility level. EWARN reporting completeness and timeliness were 89% and 72% respectively during the reporting period.

- Malaria (46 alerts), acute watery diarrhea (40 alerts), acute bloody diarrhea (16 alerts) and acute respiratory infections (3 alerts) accounted for the majority of the 108 alerts generated through EWARS in week 02, 2021. 71 percent of the alerts have been verified.

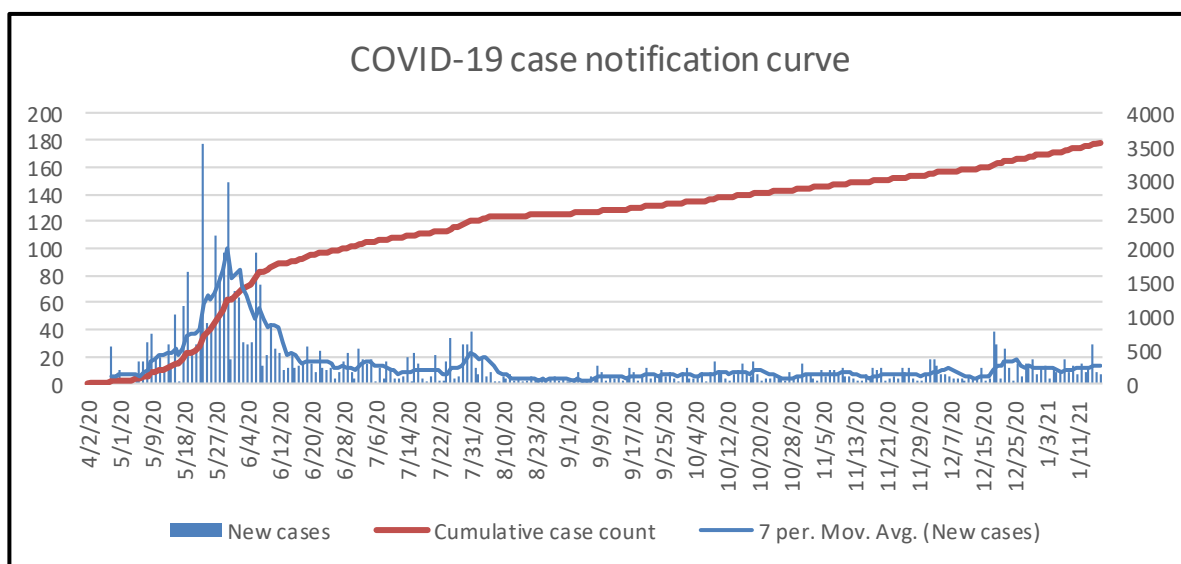
Confirmed and suspected Outbreaks

Polio Virus Outbreak

- In response to the cVDPV2 outbreak, confirmed on 18 September 2020, the country has conducted two rounds of mOPV2 campaigns. The first round of the campaign began on 10 November 2020 during which 1 489 826 (96% coverage) under-five children were vaccinated while the second round was conducted on 8 to 11 December 2020 where 1 057 590 (88% coverage) under-five children were vaccinated in 34 counties.
- The country is planning to conduct a nationwide campaign targeting over 3 million under-five children starting from 16 February 2021.
- The total confirmed AFP cases remain at 37 cases distributed across nine states: Western Bahr El Ghazal (7), Warrap state (16), Central Equatorial state (4), Northern Bahr El Ghazal (3), Lakes (3), Western Equatoria state (1), Jonglie (1), Upper Nile (1) and Eastern Equatoria state (1).

Coronavirus disease (COVID-19) Outbreak in South Sudan

- A cumulative total of 3 865 confirmed cases and 3 596 recoveries have been reported since the onset of the outbreak.
- Most cases are managed at home. Sixty-four total cases have died, yielding a case fatality rate of 1.7%
- Cumulatively, 85543 laboratory tests have been performed.
- Cumulatively, 10218 contacts have been listed and followed up since the first confirmed case was reported in April 2020, of which 9681 (94.7%) have completed 14 days of follow-up . 285 contacts are under follow.
- At the end of Week 03 2021, 25 (31.3%) of the 80 counties in the country have a confirmed case.



For more information on the COVID-19 outbreak and public health response measures, please refer to the national weekly situation update. <http://moh.gov.ss/covid-19.php>

Measles Outbreaks in Pibor, Ibba and Wau Counties

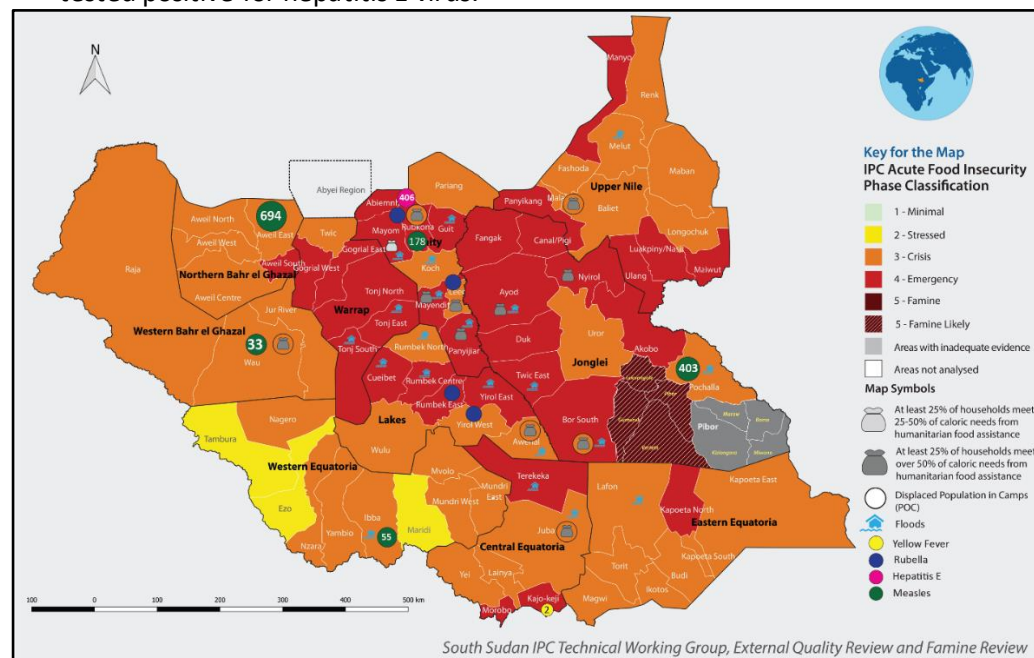
- Ibba, Western Equatoria:** A reactive measles vaccination campaign was conducted between 14 and 20 January 2021 where 11 896 (96% coverage) out of the targeted 12 454 children were vaccinated across five payams. The campaign was led by MSF with support of SMOH, WHO and partners. A cumulative 65 cases as per week 02 2021 when two cases were reported.

Suspected Rift Valley Fever (RVF) in Yirol, Lakes

- Multi-disciplinary team of human and animal health experts conducted investigation among humans and animals after some samples from the bird die-offs investigation tested positive for RVF antibodies with view of assessing for spill-over from the birds. These follow up investigations were conducted from 3 to 10 December 2020, and from 21 to 24 December 2020.
- Investigation in animals yielded 165 samples collected from cattle and goats that were shipped to National Veterinary laboratory in Juba for laboratory testing.
- Twenty-two suspected human cases were investigated and sample collected. Two deaths were investigated as well.
- All the 22 samples collected from the suspected human cases tested negative for Rift valley fever, Crimean-Congo hemorrhagic fever, Ebola virus, and Marburg.
- A number of response measures including distribution of viral hemorrhagic fever (VHF) case definition to health facilities, orientation of health workers on VHF cases definition, updating on VHF contingency and response plan, intensification of surveillance and risk communication have been instituted.
- No suspected VHF cases were reported in the past two weeks.

Suspected Hepatitis E Virus (HEV) in Agok, Abyei

- Sample results for the six blood samples sent to UVRI for confirmatory testing for HEV and other differentials are still pending.
- Twenty-six suspected cases and two deaths line-listed so far. On the initial rapid test, all the cases tested positive for hepatitis E virus.



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Operational gaps and challenges

For more details, visit: <https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2020>

- Limited resources to cover all the affected counties.
- Weak coordination mechanisms at the sub-national level.
- Insecurity and inaccessibility in conflict-affected counties.
- Huge operational costs measured against available donor funds
- Inadequate human resources for health at subnational levels

Resource Mobilization

Name of appeal	Required US \$\$	Secured in US \$	A gap in US \$
WHE Operations	22 million	2 million	20 million

Key Donors

WHO Country Office of South Sudan registers appreciation for the great support provided by all our donors. The donors are listed in alphabetical order.

- Central Emergency Response Fund (CERF)
- European Union Humanitarian Aid (ECHO)
- Global Alliance for Vaccine Initiative (GAVI)
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- The Government of Japan
- The Department for International Development (DFID)
- The South Sudan Humanitarian Fund (SSHF)
- World bank

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