



World Health Organization

Humanitarian Situation Report Issue # 8
18 - 24 FEBRUARY, 2019



The risk communication team conducting community engagement for EVD in Loparete. Photo: WHO

South Sudan

Emergency type: Humanitarian Crisis in South Sudan



7.1 MILLION
NEED
HUMANITARIAN
ASSISTANCE



1.87 MILLION
INTERNALLY DISPLACED
WITH **0.2 MILLION** IN
PROTECTION OF CIVILIAN
SITES



2.27 MILLION
SOUTH
SUDANESE
REFUGEES IN
NEIGHBOURING
COUNTRIES

HIGHLIGHTS

- The Ebola vaccination is ongoing in Yambio and Yei and as of 24 February, a total of 904 healthcare and frontline workers have been vaccinated since the launching on 28 January 2019.
- On 20 February 2019, a 30-year-old man who presented to Yambio hospital with signs and symptoms of suspected Ebola Virus Disease (EVD) died on 21 February 2019, after vomiting blood. The sample tested negative for Ebola.
- A total of 34 suspected measles cases were reported from Pibor County with Gumuruk (5) and Pibor (25) as at end of week 7, 2019.
- Food security situation continues to deteriorate due to conflict-driven displacement, low crop production, economic crisis, climatic shocks and humanitarian access challenges.
- The Regional consensus climate outlook for March, April, and May 2019 indicates an increased likelihood of normal to above normal rains in the Southern parts of the country. These enhanced rains will likely exacerbate flooding and calls for initiation of appropriate mitigation strategies.

WHO FUNDING REQUIREMENTS- 2019



1.7 M FUNDED
23.4M REQUESTED (UNDER 2019 HRP)

ACUTE MALNUTRITION -2019

860 000 CHILDREN 6-59 MONTHS
(260 000 SAM, ESTIMATED TO BE ACUTELY
600 000 MAM) MALNOURISHED IN NEED OF
TREATMENT

57 FUNCTIONING STABILIZATION
CENTERS ACROSS COUNTRY

CUMULATIVE VACCINATION - 2019



3 980 ORAL POLIO VACCINATION
8 789* # OF CHILDREN (6-59mths)
VACCINATED AGAINST MEASLES
*DATA INCOMPLETE
7 783 # OF PERSONS VACCINATED
AGAINST MENINGITIS
904 EBOLA VACCINATION

HEPATITIS E - 2019



18 TOTAL CASES

- Food security situation continues to deteriorate due to conflict-driven displacement, low crop production, economic crisis, climatic shocks and humanitarian access challenges. An increasing number of people face severe food shortages in South Sudan: Nearly 7 million people expected to be in acute food insecurity at the height of lean season (May-July). Finding shows that the number of people who are acutely food insecure has already increased by 13% since January last year. This includes some 30,000 people who are already experiencing extreme food insecurity (in catastrophe phase or IPC5, the highest level of food insecurity) in Jonglei and Lakes states, in eastern and central South Sudan. Food insecurity continues to be driven by the cumulative effects of conflict, insufficient food production and associated population displacement. Local cereal production in 2019 will only supply 52 percent of the country's cereal needs, compared to 61 per cent in 2018. At the current level of assistance, the report indicates, some 50,000 people will be facing catastrophe (extreme food insecurity) between May and July. Without any assistance, this number could rise to 260,000.
- Malnutrition levels remain critical in many areas, with some 860,000 children under the age of five severely malnourished. However, there is likely to be an increased incidence of acute malnutrition during the coming lean season in most parts of the country. According to the IPC Acute Malnutrition scale, 12 counties in South Sudan (Akobo, Ayod, Canal Pigi, Pibor, Duk, Urur (former Jonglei State), Abiemnhom, Panyijar and Pariang (former Unity State), Twic (former Warrap State) and Awerial (former Lakes State) are classified as in 'Critical' (with Global acute malnutrition rate 15.0%- 29.9%).

Climate outlook

- The Regional consensus climate outlook for March, April, and May 2019 indicates an increased likelihood of normal to above normal rains in the Southern parts of the country. These enhanced rains will likely exacerbate flooding and calls for initiation of appropriate mitigation strategies.

Insecurity and its impact on civilians

- More than 15,000 civilians are seeking safety in the bush outside Yei town after being cut-off from assistance since January due to the continued insecurity and shifting frontlines. Humanitarian partners are working to establish where these people are hiding to develop an appropriate humanitarian response, possibly using survival kits in view of the protection concerns and the need to do no harm.

Inter-agency mission to Maridi and Amadi States suspended

- An inter-agency mission planned to assess the humanitarian situation of people in Maridi and Amadi States in Western Equatoria was postponed due to a deterioration in the security situation. Humanitarian organizations have reported increased movement of armed troops, forced recruitment of youths and ex-combatants, and looting and destroying of civilian properties by armed elements in Minga, Lomo and Lossoh villages in Kediba, Amadi State. SPLA-iO soldiers have reportedly restricted children's access to schools and closed the health facilities in Bari and Lossoh in Kediba, alleging that NAS forces are planning to abduct school children and loot medical supplies. The tense security situation has led to civilian displacement. The assessment mission will be rescheduled if the security situation improves.

Returning of refugees

- On 17 February, local authorities reported that an estimated 500 returnee families from the Juba PoC arrived in Nyany Boma, Twic East County in Jonglei. Local leaders in the area have called upon humanitarian organizations to assist the returnees, who are mainly women and children. Humanitarian organizations are working with local authorities to verify the figures and determine an appropriate response.
- About 350 individuals have reportedly returned from Khartoum, Sudan, to Unity's Bentiu this week. While some families have continued onward to their villages in Rubkona, Mayom and Koch counties, others have settled in Bentiu town.

- According to RRC, about 1,000 new IDPs moved from Undukori to Mugwo area fleeing recent armed fighting in the region. It is reported that the IDPs are lacking basic services such as food, shelter/NFI, health and water. Humanitarian organizations in Yei are planning a rapid needs assessment to Mugwo to verify this information.

Epidemiological Update

- In epidemiological week 7 of 2019, completeness and timeliness for Integrated Disease Surveillance and Response (IDSR) reporting at county level was 74% while EWARN reporting from the Internally Displaced Population (IDP) sites was 89%.
- A total of 19 alerts were reported in week 7. The teams verified 59% of the alerts, and none required a response.
- In epidemiological week 7 of 2019, Measles (10), bloody diarrhea (5) and Acute Watery Diarrhoea (4) were the three most frequently reported infectious diseases.
- On 20 February 2019, a 30 years old man who presented to Yambio hospital with signs and symptoms of suspected Ebola Virus Disease (EVD) died on 21 February 2019, after vomiting blood. Accordingly, on the same day, the State Rapid Response Team (RRT) investigated, collected blood samples, listed all contacts, and advised on preventive measures including initiation of safe and dignified burial. The sample tested negative for EVD.
- A total of 18 suspected HEV cases have been reported in Bentiu PoC since the beginning of 2019. There were three (3) new cases reported in week 7.
- Two suspected cholera deaths in adults were reported in Kuerdeng, Old Fangak on 21 February, 2019 amid increasing cases of AWD in Nyadin and Kuerdeng.
- A total of 34 suspected measles cases have been reported from Pibor County with Gumuruk (5) and Pibor (25) as at end of week 7, 2019. Four cases have been confirmed positive for Measles IgM antibodies and no deaths.
- Malaria was the leading cause of morbidity and mortality accounting for 74% of all morbidities and 21% of all mortalities in week 07, 2019. The trend analyses showed at least 5 counties in three state hubs having malaria trends that are significantly higher than the expected levels. Counties with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) include: Kwajok hub (Gogrial East, Tonj South, Tonj East), Wau hub (Wau), Rumbek hub (Rumbek Center).
- For more information on Integrated Disease Surveillance and Response (IDSR) please click on this link: <http://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin>.

WHO Public Health response

Ebola Virus Disease preparedness and response:

- The vaccination exercise against Ebola, for frontline and healthcare workers in Yambio and Yei River State is ongoing. As of 23 February, 2019, a total of 904 healthcare and frontline workers have been vaccinated in the two locations.
- The national level Ebola task force continues to hold weekly meetings with the last one held on 21 February 2019 at the National Public Health Emergency Operations Center in Juba.
- State level Task Force meetings also were held and updates from Yei,



A dissemination meeting of the EVD case definition for SSRC community volunteers

Yambio, Jubek, Nimule and Maridi shared with the National Task Force.

- Screening of travelers entering South Sudan continues with support from different partners including WHO, IOM, SCI, WVISS, CORAID, World Vision and CUAMM. Four new screening points (Bangangai, James Diko, Sangura, and Basukangbi) in Gbudue State were operationalized by World Vision bringing the total of operational screening sites to 23. In week 7 of 2019, a total of 59,233 individuals were screened at the various screening points in the country.
- Dissemination of Community EVD case definition is ongoing in the high-risk states by different partners. Those targeted include those involved in social mobilization and community surveillance.
- For more information on the weekly Ebola Virus Disease preparedness update access the report on this link: <https://bit.ly/2Lwkj5p>.

Nutrition

- From 18 – 23 February, 2019, WHO in collaboration with CUAMM and UNICEF trained 24 Medical and Nutrition staff working in stabilization centers (11 in Rumbek and 13 from Upper Nile on Inpatient Management of Severe Acute Malnutrition with medical complication. This will contribute to the reduction of mortality related to SAM with complications. With these two trainings for Upper Nile and Lakes hubs, WHO has now completed the roll out of the State Level ToT on Inpatient Management of SAM with medical complications, to support the MoH build the capacity of front line staff in delivery of life-saving medical and nutrition services to the most vulnerable children affected by severe acute malnutrition. Over a period of one year, WHO has trained a team of 19 Master Trainers and 160 ToTs, almost all South Sudanese (99%) doctors, nurses, clinical officers and nutritionists, working in stabilization centers. The capacity building program has been rolled out with full geographical coverage (all states). In addition, WHO will continue to support SC through provision of SAM kits, WASH equipment, Early childhood development tools, WASH trainings and Psycho-social support trainings, and improved referral through screening in health facilities (surveillance sentinel sites).

Immunization

- WHO is conducting polio infectious materials containment assessment in 85 selected health facilities in all States. The findings will help the country to improve the control measures and maintain the polio free status.
- During the reporting week preparations for Sub National Immunization Days (SNIDs) for Polio vaccination campaign targeting over 2 million children under five slated for the second week of March 2019 continued.
- The WCO office with support from AFRO conducted an assessment of environmental surveillance sites in Juba. The results indicate that the sites are functional, and a total of 92 samples were obtained, and no polio virus found so far

Prepositioning of supplies

- To improve management of emergency kits, WHO conducted the second round of Core Pipeline Kits training in Juba for 31 participants drawn from various partners.

Updates from the States:

- On 21 February 2019, the Deputy Special Representative of the Secretary General, Mr. Alain Noudehou led a one-day mission to Yei River State to assess the humanitarian situation and the challenges facing EVD preparedness in the state. The delegation noted the progress made to attain operational readiness in Yei. However, access outside Yei

Town remains restricted due to insecurity and this has resulted in at least 10,000 displaced persons in Yei town and reduced access to areas outside Yei town

- Community awareness creation and engagement activities are ongoing in all the high-risk states with support from different partners: SSRC, SSDO, Unicef partners, WHO, Reach etc. REACH South Sudan conducted a monthly assessment in settlements in the



WHO supporting the State RRT to investigate suspected measles cases in Malual Chaal Village in Jonglei. Photo: WHO

high-risk areas of Greater Equatoria aiming at improving understanding of EVD preparedness related knowledge, behavior and practices. Findings were shared and discussed at the national Risk communication technical working group.

WHO Hub office in collaboration with INTERSOS org, conducted a one day Ebola community awareness session targeting (60) individuals from PoC and Malakal Town, the participants included Youths, Women and community leaders. WHO provide technical support and made presentations on EVD basic facts; preparedness, response and prevention

- WHO and State Rapid Response Teams continue with active case search and identified 5 new suspected case of measles in the community in Bor, Jonglei State. The cumulative number of suspected cases are ten, of which 8 were reported in week 7, all 10 samples were sent to NPHL in Juba for laboratory confirmation.
- WHO participated during Interagency Emergency meeting held on 21 February 2019 following the report from the RRC Director on the deteriorating humanitarian situation among the returnees in Rumbek North County. The meeting discussed the humanitarian situation and the participants agreed to conduct Inter-Agency Need Assessment (IRNA) from 26 February – 1 March 2019 in Rumbek North.
- WHO provided technical support during a one day (20 February, 2019) Interpersonal Communication training organized by UNICEF in collaboration with SMOH for 50 vaccinators in Rumbek, Western Lakes State. This is aimed at boosting their capacity and thus improving access to routine immunization.
- In Aweil, an Integrated team involving WHO, UNICEF, ARC, CHD and SMOH conducted an assessment visit to Mabok Akot Health facility one of the hard to reach facilities during the rainy season that was prioritized to have benefitted from ARKTech distribution. The facility has not been functioning well and EPI vaccinator deploy not qualified to provide service. The team made recommendations for action to be followed up.
- To strengthen capacity at state and counties level for effective and rapid response to acute public health events, the Ministry of Health with support from WHO trained 32 participants to form two (2) Rapid response teams for Wau and Jur River counties respectively from 4-8 February, 2019. Those included Clinical officers, Medical assistants, Laboratory Technicians, Public Health Officers, Pharmaceutical Assistant, Nurses, Community Health Workers and Community Development Officers.

Operational gaps and challenges

- The humanitarian operations continue to persistently be hampered by insecurity limiting access, poor road network, floods, and bureaucracy at all levels.

Resource mobilization

Financial Information:

- The total recorded contributions for WHO emergency operations as of 17 February, 2019 amounts to US\$ 1.7 million*(ECHO, SSHF) for the 2019 financial year with a funding gap of 22 million.
- The Ebola Preparedness plan for WHO has received \$4.6 million (WHO Core, WHO/CFE, DFID, Canada, Germany, CERF).
- 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. Concerted efforts to mobilize additional resources to address the funding gap are ongoing.

FUNDING STATUS OF APPEALS US\$				
	NAME OF THE APPEAL	REQUIRED FUNDS	FUNDED	% FUNDED
WHO	Humanitarian Response Plan (WHO)	\$ 23.4 million	\$ 1.7 million	7.3%
	Ebola Preparedness	\$ 5.5 million	\$ 4.6 million	84%

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