South Sudan
Emergency type: Humanitarian Crisis in South Sudan

WHO FUNDING REQUIREMENTS - 2019

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Funded</th>
<th>Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.2 M</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>23.4 M</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ACUTE MALNUTRITION - 2019

<table>
<thead>
<tr>
<th>Children 6-59 months estimated to be acutely malnourished in need of treatment</th>
<th>860 000</th>
</tr>
</thead>
<tbody>
<tr>
<td>(260 000 SAM, 600 000 MAM)</td>
<td></td>
</tr>
<tr>
<td>Functioning stabilization centers across country</td>
<td>59</td>
</tr>
</tbody>
</table>

CUMULATIVE VACCINATION - 2019

<table>
<thead>
<tr>
<th>Vaccination</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral polio vaccination 1st round</td>
<td>2 050 250</td>
</tr>
<tr>
<td># of children (6mths – 15 years) vaccinated against measles</td>
<td>266 837</td>
</tr>
<tr>
<td># of persons vaccinated against meningitis</td>
<td>17 135</td>
</tr>
<tr>
<td>Ebola vaccination</td>
<td>2 065</td>
</tr>
</tbody>
</table>

PUBLIC HEALTH THREAT - 2019

<table>
<thead>
<tr>
<th>Disease</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total cases hepatitis E</td>
<td>39</td>
</tr>
<tr>
<td>EVD alerts - cumulative</td>
<td>45</td>
</tr>
<tr>
<td>Confirmed EVD cases</td>
<td>00</td>
</tr>
</tbody>
</table>

HIGHLIGHTS

- Measles continues to be a major public health concern in South Sudan with outbreaks confirmed in 11 counties and three PoC sites since the beginning of 2019. Cumulatively a total of 937 cases have been reported in the 11 counties and three PoC sites with 60 laboratory-confirmed cases and seven deaths. Outbreaks in Mayom and Abyei have been controlled.

- The Ebola vaccination exercise in Jubek State is ongoing with 161 frontline health workers vaccinated to-date.

- Malaria was the leading cause of morbidity and mortality accounting for 45% of all morbidities and 24% of all mortalities in week 17 of 2019.

- South Sudan political parties unanimously agreed to extend the pre-transitional period by six months. Also, on 03 May, the President lifted a state of emergency imposed in 2017 in five northern states of the country, in a bid to help foster peace.
Overview of the Humanitarian crisis

- A joint United Nations programme on education in emergency launched on 26 March in Aweil town, Northern Bahr el Ghazal has given a ray of hope to the children. The programme will provide hot daily meals to over 75,000 school children, train 1,600 teachers, equip learners with educational supplies and provide psychosocial support services to over 40,000 children and adolescents.

Event Description/ Situation update

Pre-transitional period by six months.

- The pre-transitional period has been extended by six months following a meeting held in Addis Ababa where the South Sudan political parties unanimously agreed. The meeting held from 2-3 May took stock of the status of the implementation of the key pre-transitional tasks, identified progress made, challenges encountered and deliberated on practical steps to address identified challenges. Further discussions on the outcome of the meeting will be held during the upcoming 67th Extraordinary Session of the IGAD Council of Ministers in Juba, South Sudan on 7 and 8 May 2019. Also, on 03 May, the President lifted a state of emergency imposed in 2017 in five northern states of the country, in a bid to help foster peace.

Civilians continue to flee

- In Western Bahr el Ghazal, approximately 3,000 people fled to Wau town from the ongoing fighting around Kuajena and Roc-Rocdong, Jur River County.

An Inter-agency Rapid Needs Assessment (IRNA) mission

- An inter-agency team comprising humanitarian partners from NGOs and UN agencies is currently visiting Ibba and Maridi counties until 7 May. The team is assessing the 10,000 reported IDPs and over 5,000 people returning to their homes from within and outside the country, mainly from Democratic Republic of the Congo (DRC). Priority needs of these IDPs and returnees include food, safe drinking water, seeds and tools, health services, school materials and cooking utensils and bedding materials.

Epidemiological Update

- In epidemiological week 17 of 2019, completeness and timeliness for Integrated Disease Surveillance and Response (IDSR) reporting at county level were 59% and 56% respectively while EWARN reporting from the Internally Displaced Population (IDP) health facilities was 81% for timeliness and 77% for completeness.
- A total of 68 alerts were reported in week 17. The teams verified 35% of the alerts, 6% risk assessed and 1% required a response.
- Measles, acute watery diarrhea, malaria, and bloody diarrhea were the most frequently reported infectious diseases alerts in epidemiological week 17 of 2019.
- Measles continues to be a major public health concern in South Sudan with outbreaks confirmed in 11 counties and three PoC sites since the beginning of 2019. Cumulatively a total of 937 cases have been reported in the 11 counties and three PoC sites with 60 laboratory-confirmed cases and seven deaths. The outbreaks in Mayom and Abyei have been controlled.
- Malaria was the leading cause of morbidity and mortality accounting for 45% of all morbidities and 24% of all mortalities in week 17, 2019.
- 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
Ebola Virus Disease preparedness and response

• The vaccination exercise against Ebola Virus disease is still ongoing and as of 5th May 2019, a total of 2065 frontline healthcare workers have been vaccinated. The vaccination exercise was completed in Yambio in Gbudue State (935), Yei River State (626) and Nimule/Torit State (343). 161 frontline health workers have been vaccinated in Jubek State so far.

• EVD preparedness coordination meetings at national and state levels continue to be held on a weekly basis with key action points identified and shared for implementation by the relevant technical working groups. To enhance EVD sample shipment from hard to reach areas, the national level task force meeting held on 2nd May 2019, agreed to liaise with UNMISS, UNHAS and EVD State Task Forces for Gbudue and Tambura to identify locations/helipads in Ezo and Tambura for aircrafts to land for sample collection.

• During week 17, a total of 64,711 incoming travelers were screened from the 30 functional screening points in the country.

• For more information on the weekly Ebola Virus Disease preparedness update access the report on this link: https://www.afro.who.int/publications/weekly-update-ebola-virus-disease-evd-preparedness-south-sudan.

Polio National Immunization Days

• WHO and partners supported the MOH to conduct the second round of Polio Supplementary Immunization Activities (SAIs) nationwide, which was integrated with Vitamin A and deworming. It started on the 30th of April 2019 and remains ongoing. Data received shows a total of 721,848 (22%) under five children vaccinated with OPV, 455,740 (15%) children 6 to 59 months reached with Vitamin A and 408,751 (15%) children 12 to 59 months dewormed.

• 40 Lot quality assurance sampling (LQAS) surveyors were trained and deployed to selected counties to conduct a post-campaign evaluation survey of the polio campaign. Data collection for the campaign is ongoing.

• As at week 17 of 2019, the total number of Acute Flaccid Paralysis cases reported are 134, with the national Non-Polio AFP rate at 5.0 in 2019, all state hubs haven achieved NP-AFP rate of 2.0. with stool adequacy of 92%.

• The country continues to implement Periodic Intensification of Routine Immunization (PIRI) activities to improve the immunization coverage.

Kala-azar (Visceral Leishmaniasis)

• Since the beginning of 2019, a total of 208 Kala-azar cases including 6 deaths and 4 defaulters have been reported from 10 treatment centers. Of the 208 cases reported, 147 (71%) were new cases. In the corresponding period in 2018, a total of 831 cases including 23 deaths and 18 defaulters were reported from 21 treatment centers. Kala-azar is endemic Upper Nile, Unity, Jonglei and Kapoeta.

Updates from the State Hubs

• Lakes Hub: WHO, UNICEF and other partners supported the State Ministry of Health to conduct Integrated- (Oral Polio Vaccine, Vitamin A supplementation and Deworming) National Immunization Days campaign from 30th April – 3rd May 2019 to increase access to vaccine, Vitamin A and Deworming; targeting 373,261 children less than 5 years with services mentioned-above in Lakes Hub. During the campaign, all children from 0 -59 months were given b-OPV vaccines, children from 6 – 59 months received Vitamin A and children from 12 -59 months were targeted with Albendazole. The campaign is over in some areas and some area will finish on 5th May, 2019. Data
WHO participated in Humanitarian Coordination Meeting held on 3rd May 2019 in the RRC Office, Western Lakes Hub. The meeting discussed progress on the implementation of humanitarian activities, challenges and the way forward. Returnees in Rumbek North have been integrated back into the communities. FAO reported that installation of cold chain in preparation for Animal vaccination against Rift Valley Fever disease was in progress across the hub and cattle keepers to be trained on their roles in Animal disease surveillance for timely detection and reporting. The State Ministry of Health in collaboration with UNICEF, WHO and CHADO launched integrated NIDs campaign on 30th April, 2019 in Rumbek Freedom Square to mobilize the community to ensure their children are immunized during the campaign.

There is suspected food poisoning in Leer County now involving 4 payams (Padeah, Gandor, Toch-riak. The initial cases were traced back to mid-April 2019 and were managed at clinics operated by MSF and UNIDO in Leer. An investigation has been commissioned to obtain epidemiological information and samples for laboratory testing.

In Unity State, WHO Hub office supplied antimalarial medicines to IOM during the reporting week. Routine malaria prevention and control services ongoing in the state include case management in health facilities, health education on the use of mosquito nets; environmental controls such draining stagnant water, and chemoprophylaxis to pregnant mothers.

WHO HIV/TB Zonal Officer in Lakes State conducted supportive supervision in Kiir Mayardit Hospital on 2nd May 2019. During the visit, WHO and Director General for Kiir Mayardit hospital discussed ways of addressing the challenges including the persistent lack of PMTCT and HTS monthly reports, limited understanding by staff on use of testing registers, process of generating monthly report and monthly reporting tools. This is aimed at improving completeness and timely of reporting.

In Nimule, Solidarity International in collaboration with WHO trained 40 health workers on Infection prevention and control/WASH. The designated IPC focal persons per facility for 10 facilities were identified and each given terms of reference.
The humanitarian operations in the country still continue to be hampered by sporadic incidents of insecurity, and poor road network.

**Financial Information:**
The total recorded contributions for WHO emergency operations as of 5th May 2019 amounts to US$ 7.2 million (DFID, Government of Japan, USAID, GAVI, ECHO, SSHF) for the 2019 financial year with a funding gap of US$ 16.2 million. The Ebola Preparedness plan for WHO has received US$ 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.

<table>
<thead>
<tr>
<th>FUNDING STATUS OF APPEALS US$</th>
<th>NAME OF THE APPEAL</th>
<th>REQUIRED FUNDS</th>
<th>FUNDED FUNDED</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>WHO</td>
<td>Humanitarian Response Plan (WHO)</td>
<td>$ 23.4 m</td>
<td>$ 7.2 m</td>
<td>31%</td>
</tr>
<tr>
<td></td>
<td>Ebola Preparedness</td>
<td>$ 5.5 m</td>
<td>$ 4.6 m</td>
<td>84%</td>
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The operations of WHO in South Sudan are made possible with generous support from the following kind donors:

This Humanitarian Situation Report has been developed with support from the following WHO Country Office Clusters: Emergency Operations, Health Information, Surveillance & Risk management, Disease Control, Integrated Services, Field Offices Coordination and Health Cluster Coordination.

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For more information – WHO South Sudan weekly situation reports: