Bi-Weekly Humanitarian Situation Report

Emergency type: Humanitarian crises



Issue #: 29

Reporting Weeks: 40 & 41 Date: 6 Oct – 30 Oct 2019



Dr Olushayo Olu along with partners visited the flood affected areas. Photo: WHO.

Humanitarian Situation Update in South Sudan



7.2 M Need Humanitarian Assistance



1.47 M Internally Displaced Persons with 0.2M living in PoC's



2.3M South Sudanese in other countries



6.3 M Severely Food Insecure



1.3M Malnourished Children



352K Malnourished Women



Kev Bi	-Weekly Highlights	Acute maln	utrition					
	WHO Country Representative, Dr		1,300,000	Acutely malnourished				
	Olushayo Olu pays a visit to Torit Hub to assess health situation.		57	Stabilization centers				
\Rightarrow	MoH with support from WHO rolled out	Cumulative	mulative vaccination					
	a mobile phone based IDSR system to allow real-time detection and response		121, 066 (20%	Vaccinated with OPV3 vaccine under 1yr				
	to disease outbreaks.		119,558 (38%	Vaccinated against measles under 1yr				
•	MoH, WHO & partners with support from USAID reviewed & adapted the 3 rd		7, 783	Vaccinated against meningitis				
	edition of the Integrated Diseases	Public healt	h threats					
	Surveillance & Response Technical		16	Counties with confirmed measles outbreaks in				
	Guidelines & training materials.			2019.				
-	South Sudan with support from WHO			2013.				
	has started in-country GeneXpert & PCR		04	Protection of Civilian (PoC) sites with confirmed measles outbreaks in 2019				
	testing of samples for Ebola virus and							
	other differential diagnoses.							
\Rightarrow	WHO, UNICEF and other partners have		11	Counties we counties were malaria cases				
	prepositioned cholera kits in hotspot			surpassing their set thresholds.				
	areas.							
-	MoH with support from WHO, Gavi, the vaccine Alliance and other partners appraised 2019 immunization programme performance.		10	EVD alerts have been reported from Maridi,				
				Yei, Nimule and Yambio in the reporting period				
				bringing cumulative total of 102 alerts since				
				August 2018.				

	Humanitarian Situation					
	More than 6.35 million people severely food insecure					
Overview of the humanitarian crises	 More than 6.35 million people – 54 per cent of the South Sudanese population –are severely food insecure despite large-scale humanitarian assistance, according to IPC analysis. Estimated 1.7 million people faced Emergency (IPC Phase 4) acute food insecurity and 10,000 people faced catastrophic conditions (IPC Phase 5). There is a 5 per cent reduction in the proportion of severely food insecure people compared to the same period last year. Despite slight improvements in food security, number of acutely malnourished children was estimated to reach 1.3 million. 					
Emergency Response activities by humanitarian agencies	 Estimated 1.3 million people to benefit from South Sudan Humanitarian Fund (SSHF) allocation of US\$36 million under second standard allocation (SSA) of the year. Over 212 000 vulnerable South Sudanese to access mobile health services and 130,000 to access safe water Fifty-six per cent of the beneficiaries are women and girls. Nearly 160 000 children to be vaccinated against measles to stem the spread of the disease; some 145 000 infants and young children to access feeding counselling. 					
Floods worsen living	Seasonal forecast of the National Meteorological Department reported above normal rainfall					



conditions as rains intensify across the Country

in South Sudan for the period June to November 2019.

- Consequently, torrential rains have caused serious flooding in many parts of South Sudan (see map) and as a result the living conditions of hundreds of thousands of South Sudanese people in many parts of the country have worsened.
- Heavy rains and flooding in several parts of the country have displaced people, led to increased malaria cases and water-borne diseases including acute watery diarrhea and reportedly led to incidents of drowning.
- Floods have also damaged crops, houses, bridges, and airstrips, affecting people's movement and living conditions, reducing their access to basic services.
- 32 counties affected by floods in Jonglei, Upper Nile, Warrap, Eastern Equatoria, Northern Bahr el Ghazal, Unity and Lakes, and forced communities and hundreds of thousands from their homes.
- 60% of the areas classified as having extreme levels of acute malnutrition mostly affecting children and new mothers.
- Nearly 1 Million people (908,000 people) have been affected the floods, displaced so many communities including internally displaced people, refugees and their host communities.



Counties affected

63%



08K People affected



420K People displaced



of affected counties in acute

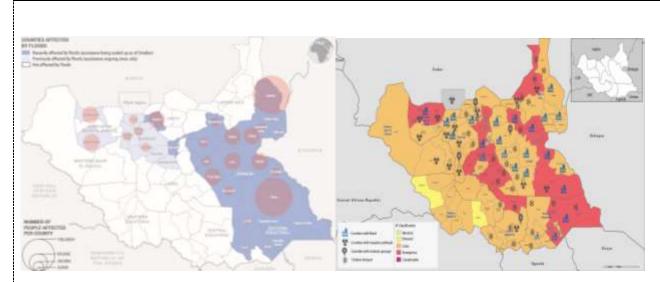
malnutrition Phase 4 (critical)



\$5.6m f

Required for flood Response

Counties affected by floods, cholera hotspots, measles outbreak and IP classification



Source/Credit: UN OCHA 2019

Source/ Credit: WHO 2019



Response to Floods in the affected areas.

- Humanitarian organizations, WHO and partners on the ground are currently responding to needs in locations including Aweil Centre in Northern Bahr el Ghazal; Ayod, Bor South, Duk, Twic East and Pibor in Jonglei; Maban in Upper Nile; Torit and Kapoeta in Eastern Equatoria; and Mayendit in Unity.
- WHO has already prepositioned emergency cholera kits in all the 10 state hubs in addition to Yei, Renk, and Kapoeta to enhance cholera preparedness.
- A cholera contingency plan has been developed and cholera vaccines can be accessed within 710days of confirming a cholera case to avert the risk of full-scale outbreak Community engagement
 and risk communication; proper case management, and improving access to safe water and
 sanitation in affected and at-risk populations is ongoing.
- Rapid response teams have been deployed to support flood assessments and are available to support further assessments and response to locations affected by floods
- Medical Mobile Teams are deployed support the ongoing flood response together with WHO Technical Officers in all the 10 state hubs.

Multi -cluster assessments conducted in flood raged areas.

- Multi-cluster rapid assessment missions are being conducted in the locations and dates indicated below
 - Unity: Mayom and Mankien -28th Oct 2019
 - 3 locations in Ayod (Mogok, Gorwai and Jiech) -29th Oct 2019
 - 3 locations in Uror (Pieri, Pathai, Yuai) -31st Oct 2019

Rumbek North –Rumbek Hub –Planned for 30th October 2019

Integrated Disease Surveillance and Response

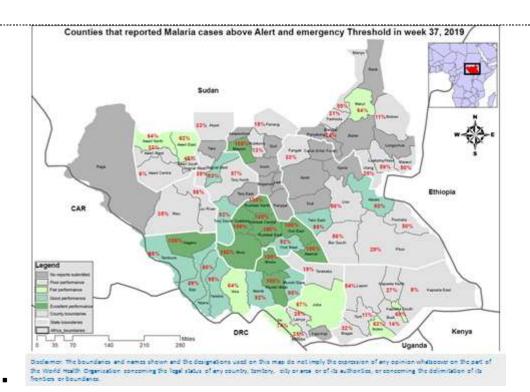
Epidemiologic al update

- IDSR reporting completeness and timeliness at county level was 59% and 54% respectively in week 40.
- Completeness and timeliness for EWARN reporting from IDP health facilities was 75% and 75% respectively in week 40.
- One hundred twenty-six alerts were reported; 81% verified, 1% alert was risk assessed and 1% required a response as of week 40.
- Acute watery diarrhea, Malaria, measles and bloody diarrhea were the most frequently reported infectious diseases alerts reported through the EWARS.

Malaria

Malaria accounted for 68.6% of all morbidities and 28.9% of all mortalities in week 40. Eleven counties reported cases surpassing their set thresholds for week 40 and they include Juba hub (Juba), Kwajok hub (Abyei) Wau hub (Wau and Jur River), Bor hub (Bor, Fangak), Bentiu hub (Rubkona and Parieng), Torit hub (Kapoeta South) and Malakal hub (Maban and Malut).





For more details visit.http://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin

Public health response

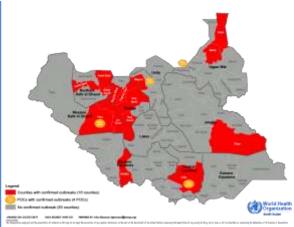
Measles outbreak response

- Since the beginning of the year, measles outbreaks have been reported in 16 counties (Abyei, Mayom, Melut, Aweil South, Aweil East, Tonj North, Juba, Wau, Aweil West, Gogrial West, Gogrial East, Renk, Tonj South, Jur River, Pibor and Yambio) and four protections of civilian (PoC) sites (Juba, Bentiu, Malakal and Wau).
- Reactive vaccination micro planning and partner engagements have been initiated after active measles outbreaks was reported in Tonj South, Jur River, Pibor and Yambio.
- There are 3 632 cases and 23 (CFR=0.6%) since the beginning of the year.
- Measles reactive vaccination campaign led by the MOH and WHO has been conducted in Labarab and Maruwa Bomas in Pibor. Out of the 3286 targeted children 6 months -15 years, 2375 (72%) were vaccinated with no reported severe adverse events following immunization in the two locations.









Ebola Virus Disease (EVD) preparedness and response

- During Epidemiological-week 42, 61,902 primary Ebola screenings were conducted along with 62 secondary screenings, at 32 points of entry. The cumulative number of screenings conducted since August 2018 was 3,568,504.
- South Sudan with support from WHO has started in-country GeneXpert & PCR testing of samples for Ebola virus and other differential diagnoses. National specialists supported by WHO Country laboratory expert now carry out sample testing in the National Public Health Laboratory that is located in Juba.
- Ministry of Health with the support from the World Health Organization assessed Yambio State Public Hospital laboratory for capacity to support a GeneXpert for EVD testing. The laboratory requires modifications to make it suitable.
- From August 2018 to date, a total of 102 alerts have been reported from Gbudue, Torit, Tambura, Yei River, Maridi, Northern Upper Nile, Terkeka and Western Lake States; of these alerts, 49 met case definition. Accordingly, blood samples were collected and tested negative using GeneXpert and PCR.
- For more details visit https://www.afro.who.int/publications/weekly-update-ebola-virus-disease-evd-preparedness-south-sudan

National updates

WHO Country Representative, Dr Olushayo Olu visited Torit to acquaint himself with health situation:

- WHO Country Representative conducted a two-day working visit to Torit from 22 to 24 October 2019 to further acquaint himself with health situation.
- Dr Olu met with Government officials including the Deputy Governor, Dr Margerat Itto, Minister of Health and Environment, UN Team and Health partners the priorities for the health system.
- Dr Olu and the Deputy Governor discussed the context of the State, the health issues and how to strengthen WHO's support in the context of the one UN in Torit state.



WHO Country Rep. Dr Olushavo Olu visited Torit to acquaint



MoH, WHO & partners with support from USAID reviewed & adapted the 3rd edition of the Integrated **Diseases Surveillance & Response Technical Guidelines & training materials:**

The MoH, WHO & partners with support from USAID conducted a five-day workshop from 14 - 18October 2019 in Juba to reviewed & adapted the 3rd edition of the Integrated Diseases Surveillance & Response Technical Guidelines & training materials which will be used to enhance capacity to detect, report & investigate suspected outbreaks.

South Sudan rolled out a mobile phone based IDSR system to allow real-time detection and response to disease outbreaks:

South Sudan with support from WHO rolled out a mobile phone based IDSR system in health facilities to allow real-time detection & prompt response to suspected disease outbreaks at national, state & health facility level.

WHO, UNICEF and other partners have prepositioned cholera kits in cholera transmission hotspot areas:

WHO, UNICEF, and partners have prepositioned cholera kits in hotspot areas countrywide & supported MoH to deploy a rapid response team to investigate suspect cholera cases in Budi in Kapoeta.

MoH with support from WHO, Gavi, the vaccine Alliance and other partners appraised 2019 immunization programme performance:

MoH with support from WHO, Gavi, the vaccine alliance and other partners convened a multi sectoral meeting on 15 October to appraise. 2019 immunization programme performance and identify challenges impeding progress towards improved coverage and equity.

States Hub updates

Juba:

MoH with support from WHO and UNOCHA conducted a medical outreach at Stone Charity Orphanage primary school in Gudele, Juba, where cases of malaria, typhoid and watery diarrhea among others have been reported among children. The team conducted consultations & treated over 300 children.

Operational gaps and challenges

- Limited resources to cover all the affected counties.
- Weak coordination mechanisms.
- Insecurity in conflict affected counties.
- Huge operational costs measured against available donor funds.
- Inadequate human resources for health at subnational levels.
- Floods due to heavy rainfall in many parts of the country.

Resource mobilization

WHO Name of appeal Required **Funds secured** Gap funds



	Humanitarian Response Plan (WHO)	\$ 23.4 m	\$ 7.2 m	31%		
	Ebola Preparedness	\$ 5.5 m	\$ 4.6 m	84%		
	WHE Operations					
Key donors	Key donors Donor Support WHO Country Office of South Sudan registers appreciation for the great support provided from a					

WHO Country Office of South Sudan registers appreciation for the great support provided from all development and health-implementing partners to various health programs that continue to provide technical support and health operations throughout the country. It is WCO great desire to pull all the resources together with concerted efforts in protecting South Sudan population from health emergencies and provide Universal Health Care to all. Resource Mobilization is ongoing to realize this goal. We acknowledge support from all organizations. Donors are listed in alphabetical order.

- Central Emergency Response Fund (CERF)
- European Union Humanitarian Aid (ECHO)
- Global Alliance for Vaccine Initiative (Gavi)
- German Humanitarian Assistance
- Government of Canada
- United States Agency for International Development (USAID)
- The Government of Japan
- The Department for International Development (DFID)
- South Sudan Humanitarian Fund (SSHF)
- World Bank

WHO Country Office Clusters:

This WHO Humanitarian Situation Report is developed with support from WHO Country Office Clusters as follows: WHO Health Emergency, Health Emergency Information & Risk Management, Disease Control, Integrated Service Delivery, Field Offices Coordination and Health Clusters

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