**Emergency type: Humanitarian Crises** 

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## **KEY FIGURES**

## **COVID-19 SITUATION**

7.5	N.A.	2 2484
<b>7.5M</b> People in need of Humanitarian Assistance		2.24M South Sudanese Refugees
1.67M		1.3M
Internally Displaced		Malnourished Children
188K		352K
Persons living in PoC <sup>1</sup>		Malnourished Women
93		6.01M
Stabilization Centers		Severely Food Insecure
121 066 (20%)	Children under one year vaccinated with oral polio vaccine	

45	1247	290
confirmed	tests	cumulative
cases	done	contacts

## **HIGHLIGHTS**

- South Sudan confirmed its first COVID-19 case on 5th April 2020 and has since recorded 45 cumulative cases.
- The majority (91%) of cases in South Sudan are asymptomatic.
- No COVID-19 deaths reported to date.
- Local transmission is highly likely as only one case had a history of travel 14 days before diagnosis.

121 066 (20%)	Children under one year vaccinated with oral polio vaccine		
962 158	Initial numbers of children Vaccinated against measles		
5	Counties with confirmed measles outbreaks in 2020		
1	PoC <sup>1</sup> s sites with confirmed measles outbreaks in 2020		
1	Counties with malaria cases surpassing their set thresholds in		



The WHO Representative for South Sudan on a courtesy call to the National Minister of Health on 28 April 2020 during which he reiterated WHO's commitment to support the government in fight against COVID-19

 $<sup>^{1}</sup>$  UN Protection of Civilians'

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Overview of the Humanitarian Crises

### • Impact of COVID-19 related movement restrictions on humanitarian access and operations

The humanitarian community in South Sudan is concerned about a directive that requires travelers to the states to obtain COVID-19 free certificate as this will negatively impact on the delivery of life-saving services in the counties. The aid workers are facing difficulties obtaining the COVID-19 free certificate due to delays in getting the tests done and issuance of the certificate.

#### Hundreds of thousands children to miss measles vaccine due to COVID-19

The second phase of the nationwide measles campaign targeting 787 000 children has been postponed due to COVID-19 outbreak in the country. The first phase of the campaign that covered 70% of the counties has been completed. South Sudan continues to experience active measles breaks because of low immunization coverage.

 Assessment of the extent of damage by the second invasion of desert locusts in the Eastern Equatorial State

Swarms of the desert locusts invaded Magwi, Torit, Ikotos, Budi, Lafon/Lopa Counties in Eastern Equatorial State between 8 and 15 April 2020 after arriving from Uganda. According to recent FAO and Ministry of Agriculture and Food Security (MAFS) assessments, the locusts are estimated to have damaged 2,000 hectares of crops at vegetative state. At field level, the damage is estimated at 7-10 per cent of leaf defoliation. This represents an unprecedented threat to food security and coincides with the beginning of the planting season.

Local authorities in Yambio appeal for more support and screening for EVD

Local authorities in Yambio appealed for urgent need for intensifying EVD screening at Gangura, Yubu and Maridi in Western Equatoria in reaction to new Ebola cases in the Democratic Republic of Congo (DRC). As the humanitarian partners shift their focus to COVID-19 outbreak, there is a concern of Ebola becoming a "forgotten" crisis in the country.

Emergency Response Activities

#### Second Phase of Oral Cholera Vaccination Campaign (OCV) in Pibor Postponed:

The second phase of OCV campaign in Pibor that was planned to start on 22 April 2020 has been
postponed due to the confirmation of COVID-19 outbreak in the country. The government has
instituted various preventive measures against COVID-19 including social distancing which meant that
the vaccination campaign would be conducted without going against this key intervention. In the first
phase 16 455 individuals were vaccinated.

## **Nutrition support in stabilization centers in Floods Affected Counties**

To support treatment at the stabilization centers located in the floods affected areas, the WHO donated eight severe acute malnutrition (SAM) with medical complication kits to Ayod, Pibor, Kapoeta, Twic East, Akobo, Canal/Pigi, Nasir, Uror. The kits will be enough to support management of 400 children for 3 months. In addition, WHO supported Buma hospital stabilization center with reporting tools and treatment guideline on inpatient management of severe acute malnutrition.

Surveillance, Epidemiological Update and Response for Disease Outbreaks

### Performance of the Integrated Disease Surveillance and Response

• In epidemiological week 16 of 2020, completeness and timeliness of reporting by health facilities was 88% and 70% respectively. The Early Warning and Response System (EWARS) reporting sites had completeness and timeliness of 77% and 61% respectively.

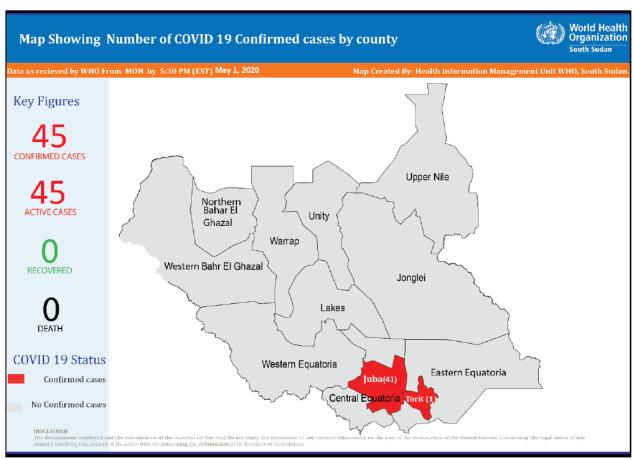
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- Malaria (24%), acute bloody diarrhea (23%) and acute watery diarrhea (21%) accounted for most alerts through the EWARS. Acute respiratory infections (ARI) alerts constituted 16% (18) of all alerts in week 16.
- Malaria was the leading cause of morbidity and mortality in the country accounting for 45% of all the illnesses and 10% of all the deaths. Pibor County reported malaria cases that surpassed its weekly threshold.

## Coronavirus disease (COVID-19) Outbreak in South Sudan

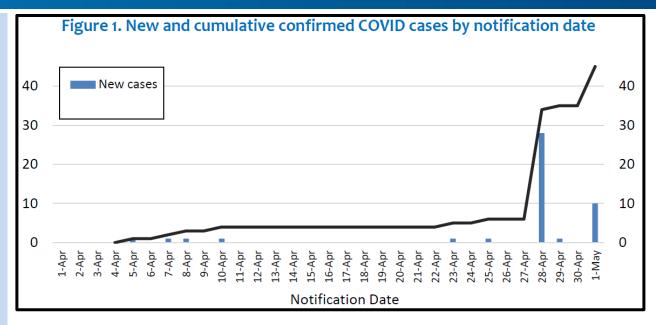


- South Sudan confirmed its first COVID-19 case on 5th April 2020 and has since recorded 45 cumulative cases.
- No deaths and recoveries have been recorded to date.
- The majority of cases in South Sudan are asymptomatic patients who were detected by active surveillance or through contact tracing.
- Local transmission is highly likely as only one case had a history of travel 14 days before their diagnosis

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#### COVID-19 public health response activities

#### Case investigation and contact tracing

A cumulative total of 290 individuals have been quarantined and monitored and as contacts of a case. Out of this 46% (98) contacts that have completed the 14-day quarantine period.

#### Rapid Response Teams (RRTs) and COVID-19 Daily Alerts

National and state RRTs investigated 151 alerts for COVID-19 within South Sudan.

#### Testing of the truck drivers at the Nimule border crossing point

WHO supported the Ministry of Health to set-up Covid-19 screening and testing point for all truck drivers and their assistant arriving from neighboring countries via the border town of Nimule.

#### Orientation of state RRTs and healthcare workers on COVID-19

WHO is supporting the state MoHs to conduct a two-day training on COVID-19 across all the 10 states with participants being selected from health facilities within the states.

#### Active surveillance in sentinel surveillance sites and PoC sites

Active surveillance is being carried out in 45 health facilities throughout Juba and in all the major PoC sites in Juba, Malakal, Bentiu and Wau.

#### **Ebola Virus Disease in Democratic Republic of the Congo (DRC)**

 Following the resurgence of EVD cases in DRC, South Sudan intensified preparedness activities on the border areas. Since the resurgence of the outbreak on 10 April 2020, seven confirmed cases have been reported, all from Beni Health Zone in DRC. The latest case was confirmed between 22 to 28 April 2020.

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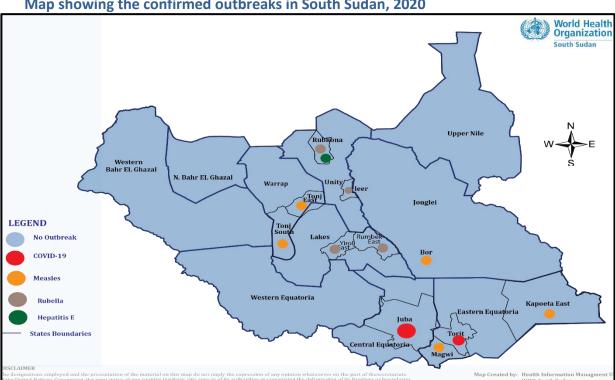


information, visit: https://www.who.int/emergencies/diseases/ebola/drcmore please 2019/situation-reports

#### **Measles and Rubella Outbreaks**

- In 2020, measles outbreaks were confirmed in five counties namely, Bor (14 cases), Tonj South (4), Tonj East (61 cases), Magwi (10 cases) and Kapoeta East (6 cases). Outbreak response measures that included reactive vaccination campaigns have been implemented in all the counties.
- Bentiu PoC (116 cases) and Aweil East (301 cases) have active outbreaks which begun in 2019.

Map showing the confirmed outbreaks in South Sudan, 2020



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

## **Operational** gaps and challenges

- Limited resources to cover all the affected counties.
- Weak coordination mechanisms at 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

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Resource Mobilization

**Key Donors** 

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

WHO Country Office of South Sudan registers appreciation for the great support provided from 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)
- United States Agency for International Development (USAID)
- The Government of Japan
- The Department for International Development (DFID)
- South Sudan Humanitarian Fund (SSHF)
- World bank

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