Emergency type: Humanitarian Crises

Issue 11| Date: 16- 30 June 2021



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COVID-19 Response

IPC PHASE 5 Response

8.3 M 2.3 MPeople in Need of **South Sudanese** Humanitarian Refugees in Assistance neighboring countries 1.6M 1.4M Internally Malnourished Children Displaced 125K 483K Persons living in Malnourished Women PoC1 77 7.2MStabilization Severely Food Insecure Centers 121 Children under one year vaccinated 066 with oral polio vaccine (20%)

Initial numbers of children vaccinated

Counties with confirmed measles

PoC¹ s sites with confirmed measles

against measles

outbreaks in 2021

outbreaks in 2021

962

158

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00

02

10 829 116 178 868 10 639 confirmed deaths Tests recoveries cases performed

ies

108 000 6
People Counties targeted

312 153 consultations conducted

HIGHLIGHTS

- A cumulative of 10 829 COVID-19 confirmed cases and 116 deaths (case fatality rate, CFR of 1.1%) have been reported in South Sudan since the onset of the outbreak.
- The Ministry of Health and partners have extended the COVid-19 vaccination drive to the states reaching 51 480 people with the first dose of AstraZeneca vaccine
- Increased looting of supplies and sustained sub-national violence in Greater Tonj and Pibor, and attacks on humanitarians by youths in several locations continue to impede humanitarian operations in South Sudan.
- WHO has distributed 243 interagency health kits (can support 243 000 people for three months), 105 pneumonia kits, 19 severe acute malnutrition with medical complication (SAM/MC) kits to partners responding in food-insecure counties.
- WHO has supported the Ministry of Health to train 75 health workers and rapid response teams on the 3rd Edition IDSR in Pibor and Akobo.
- WHO provided capacity building and technical support in stabilization centers on management of SAM/MC cases in Tonj counties.



A health worker gives an injectable inactivated poliovaccine in Juba, South Sudan

Counties with malaria cases

surpassing their set thresholds

¹ UN Protection of Gvilians'

Emergency type: Humanitarian Crises

Issue 11| Date: 16- 30 June 2021



Overview of the Humanitarian Crisis

- NGOs in South Sudan condemn recent attacks on civilians and aid workers: Amidst continued attacks on humanitarian workers and civilian workers, the South Sudan NGO Forum and its members have, on 30 June 2021, expressed their deep concern about the continuing attacks on civilians and humanitarians in recent months. The humanitarian partners are advocating for the government to ensure the safety and security of the aid workers who have been on the receiving end of targeted attacks in recent months. The rising violence will continue to disrupt humanitarian operations.
- Bentiu IDP Camp leadership challenges resolved: Intervention by the Unity State Governor has
 resolved the weeks-long tension over leadership in the Bentiu IDP Camp. The meeting with the
 camp community leaders resolved the leadership dispute that had led to violent protests in the IDP
 camp and had forced the Joint Police Unit, mandated to provided protection in the camp, to
 withdraw from the camp.
- Sub-national violence in the Greater Pibor Administrative Area (GPAA) and other locations: The humanitarian partners are monitoring the security situation in Likuangule, GPAA following the killing of over 14 civilians in age-set violence in Kongor village on 29 June 2021. There is a need for community leaders to de-escalate the situation to avoid further violence. Recent insecurity incidents in the Greater Tonj include the looting of a humanitarian warehouse Kirik Payam in Tonj North on 19 June 2021, the killing of civilians in Tonj South on 27 June 2021 and in Tonj North on 2 July 2021.
- Food Insecurity in South Sudan in 2021

The humanitarian situation in South Sudan deteriorated in the first of 2021 as a result of the compounding impact of recurrent flooding, sub-national violence and displacement, and worsening economy that has eroded the livelihoods and coping strategies of vulnerable communities across the country. The Integrated Food Security Phase Classification (IPC) report released in December 2020 projected that 7.2 million people will face high levels of acute (IPC Phase 3+) food insecurity during the lean season (April-July 2021). In the six most affected counties, some 820 000 people were projected to face a crisis or worse levels of food insecurity while over 108 000 people were projected to be in IPC Phase 5 catastrophe during the lean season.

The multi-sectoral response aimed at scaling up access to life-saving food security and livelihood, health and nutrition, protection and WASH services and assistance has been underway in the prioritized six counties since December 2020. Health response strategies are geared towards increasing access to basic health and nutrition services, enhancing capacities of disease surveillance, prevention, detection and response to infectious disease outbreaks, and building resilience of the health system to reduce preventable mortality and morbidity.

Increased looting of supplies and sustained sub-national violence in Greater Tonj and GPAA, and threats and attacks on humanitarians by youths in several locations impeded humanitarian operations. The upcoming rainy season will increase the risk of the spread of vector- and water-borne diseases such as malaria and infectious disease outbreaks and further complicate the humanitarian situation.

Emergency type: Humanitarian Crises

Issue 11| Date: 16- 30 June 2021



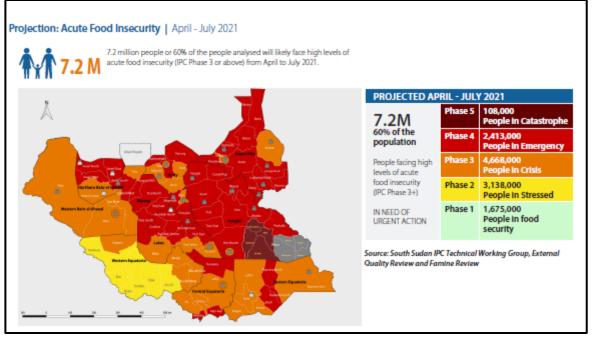


Figure 1: population estimates by IPC Phase and State based on the compilation of the South Sudan IPC Technical Working Group

Emergency Response Activities

Public Health Actions by Health Cluster/WHO in Prioritized Highly Food Insecurity counties

- Health response coordination is supported through the weekly Health Cluster and emergency responders' forums. Sub-national coordination structures supporting the response and partner coordination include WHO state focal points and deployment of technical officers and sub-national cluster coordinators.
- Scaling up of access to the primary health services is being supported through static and mobile
 health facilities supported by emergency health partners who received emergency funding from
 UNCERF, South Sudan Humanitarian Fund (SSHF) and other rapid response funds to support the
 response. Emergency health partners deployed by the cluster to the priority counties continue
 supporting health facilities and conducting mobile outreaches to reach the most affected
 communities. As an emergency responder, WHO deployed mobile teams to Pibor and Akobo where
 over 4,000 people have been reached through mobile outreaches. Since the beginning of 2021, 312
 153 consultations have been conducted in the six priority counties as at end of week 27.
- Outbreak prevention and response strategy: Routine immunizations have been strengthened
 through routine and emergency health facilities including mobile clinics. Polio vaccination
 campaigns in response to the vaccine-derived poliovirus outbreak and pre-emptive oral cholera
 vaccination campaigns in cholera hotspots have been conducted. Cholera preparedness and
 readiness has been ramped up through enhanced cholera surveillance, prepositioning of cholera
 investigation and management kit, and risk communication.
- As the core pipeline manager for emergency health kits, WHO continues to advocate for additional
 funding for the core pipeline required by the responding partners. WHO has distributed 243
 interagency health kits (can support 243 000 people for three months), 105 pneumonia kits, 19
 severe acute malnutrition with medical complication (SAM/MC) kits, and 45 cholera investigation
 kits to the responding partners in the priority counties. Additional funding for the core pipeline is
 required to support the expected increased need during the upcoming rainy season.

Emergency type: Humanitarian Crises

Issue 11| Date: 16- 30 June 2021



- WHO provided capacity building and technical support in stabilization centers on management of SAM/MC cases. Training of 36 health workers supporting stabilization centers in the three Tonj counties is underway.
- Weekly trends of the priority diseases include malaria and acute watery diarrhea are being monitored to enable timely detection and response to disease outbreaks.
- WHO supported the counties to strengthen the Integrated Disease Surveillance and Response (IDSR) through training of healthcare workers and rapid response teams. Thirty health workers in Pibor, and 45 health workers in Akobo were trained on the 3rd Edition IDSR and rapid response teams established in the two locations to enhance surveillance, alert/outbreak investigation and response. Similar training is underway in Aweil South.

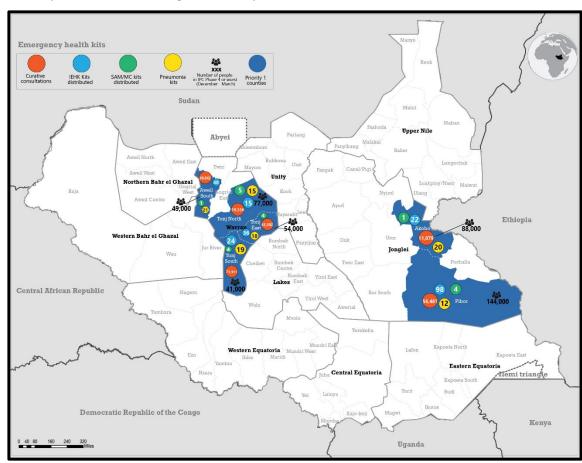


Figure 2: Emergency health kits delivered, and weekly consultations conducted in the six priority IPC 5 counties as of week 26 2021

Preparedness for the flooding season

South Sudan is expected to face another severe flooding season in 2021 for the third consecutive year. The severe flooding seasons in 2019 and 2020 affected over one million people across many counties. The government ministries and partners continue to undertake mitigation measures in readiness for the upcoming flooding season including:

- Rehabilitation of the damaged dykes in Bor South and Twic East counties. Recently, the humanitarian organization volunteers completed the construction of 2KM dykes in Twic East County.
- Monitoring of the rainfall forecast to enable the provision of early warning signals to the communities residing in flood-prone locations. Heavy to very heavy rainfall (top 10 to 5% on record)

Emergency type: Humanitarian Crises

Issue 11| Date: 16- 30 June 2021



from 100 to more than 200 mm is expected in north-eastern South Sudan while moderate rainfall (50 - 200 mm) is expected in parts of South Sudan during 13- 20 July 2021.

- Updating of flooding preparedness and contingency plans and prepositioning of essential supplies including emergency health kits
- Recent flooding has affected an estimated 21 000 people in Old Fangak County in Jonglei, and some 3 000 people in Guit County, Unity.

Performance of the Integrated Disease Surveillance and Response (IDSR)

- In week 26, 2021 IDSR reporting completeness were 85% at the health facility level and 53% for Early Warning, Alert and Response System (EWARS) partner-supported sites.
- Out of the 45 alerts generated through EWARS in week 26, 2021; 76% were verified, 2% were risk assessed and 2% required a response.
- Confirmed disease outbreaks include rubella virus outbreak in Nagero (5 cases) and Tambura (23 cases) counties, Western Equatoria State, Hepatitis E virus outbreak (631 cases) in Bentiu IDP Camp, Unity State and COVID-19 pandemic.
- Malaria remains the top cause of morbidity and accounted for 54% of all OPD cases (51 321cases)
- Total of 10 829 COVID-19 confirmed cases and 116 deaths, CFR of 1.1% as at end of week 25 2021
- Other hazards include floods (unseasonal) in over four counties; malaria upsurge in one county.
- Central Equatoria State rapid response team investigated three deaths occasioned by unknown illness in Juba Military Hospital and Lobonok Payam, Juba County. Additional cases with similar symptoms of swelling of joints, generalized body itchiness and rashes around the pubic area were line-listed and blood samples collected. Further investigation with support of nutrition specialist is planned as micro-nutrient deficiency is suspected as a potential cause of the illness.

Confirmed and suspected Outbreaks

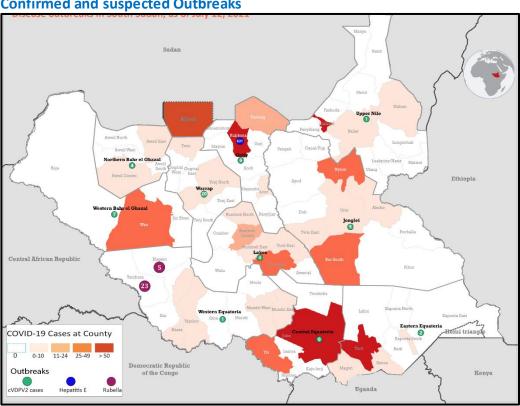


Figure 3: Active disease outbreaks by counties in South Sudan as of week 26

Surveillance, **Epidemiological** Update, and **Response for** Disease **Outbreaks**

Emergency type: Humanitarian Crises

Issue 11| Date: 16- 30 June 2021



Polio Virus Outbreak

- The last wild poliovirus in South Sudan was in 2009 and declared wild poliovirus free in June 2020. The country continues to maintain its wild polio-free status.
- The country last isolated circulating Vaccine-Derived Polio Virus type 2 (cVDPV2) cases in 2014 in Unity state, before the 2020 outbreak.
- In June 2021, 2 new cVDPV2 cases were reported, 1 from an index case and 1 from a contact's sample bringing the total number of cases to 58 (50 cases in 2020 and 8 in 2021) since the outbreak started.
- Seven new cases were reported after completion of one round of mOPV2 and one after the 2nd round of the vaccination campaign.
- The most recent cVDPV2 case from AFP sample was reported from Panyijar, Unity state, with the date onset of paralysis on 08 April 2021.
- Two rounds of mOPV2 have been conducted with total of 955,350 (109%) children vaccinated in the targeted counties; LQAS survey conducted in 15 counties and 12 scored acceptable coverage of 95% and above.

Coronavirus disease (COVID-19) Outbreak in South Sudan

- Since the beginning of the outbreak, 108 291, including 363 imported cases, and 116 (case fatality rate of 1.1%) deaths have been reported in South Sudan.
- The case count and positivity yield have begun trending up in weeks 24 and 25 of 2021. The average positivity yields have been declining for the last eleven epi weeks reaching a low of 0.4% in week 19 before increasing to 1.4% in weeks 24 and 25.
- As of the end of week 25, 2021, 35 (44%) counties out of the 80 counties in the country have confirmed COVID-19 case.
- Eight out of the 24 alerts reported through the call center/hotline in week 25 tested positive for COVID-19. Cumulatively, 2829 alerts have been reported, out of which 2 702 (96%) were verified and 2622 (97%) were sampled.
- Two SARS-CoV-2 lineages were detected in South Sudan. The first variant of interest (VOI) detected in the South Sudan samples is the A.23.1 lineage and the second one is the B.1.525 lineage
- South Sudan's COVID-19 vaccination drive began on 6 April 2021 with health workers receiving their first dose of the Astra Zeneca vaccine at Juba Teaching Hospital. So far 51 480 people have received their doses while 4 234 people have received both doses of the vaccine across the country. The rolling of the vaccination exercises to the states has helped to ramp up the vaccination campaign and utilization of the available vaccines.

Emergency type: Humanitarian Crises

Issue 11| Date: 16- 30 June 2021



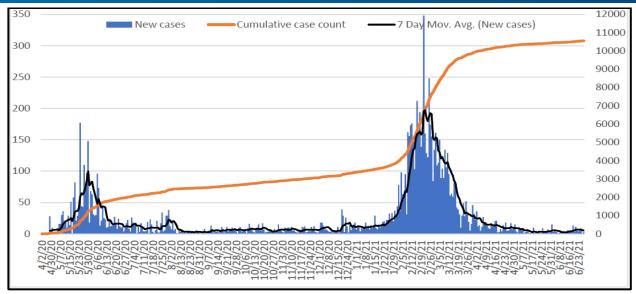


Figure 4: Epidemiological curve of reported cases through Week 25 2021, showing new cases (blue bars), rolling monthly average of reported cases (black line), and total cumulative reported cases (yellow line)

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

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

Operational gaps and challenges

- 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

Key Donors

Name of appeal	Required US \$\$	Secured in US\$	A gap in US \$
WHE Operations	22 million	5 million	17 million

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

- African Development Bank Group (AfDB)
- Central Emergency Response Fund (CERF)
- Contingency Fund for Emergencies (CFE)
- European Union (EU)
- 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)
- The South Sudan Humanitarian Fund (SSHF)
- World bank

Editorial Team: Dr Joseph Wamala, Dr Diba Dulacha, Dr Chol Yur, Ms Sheila Baya, Ms Jemila M. Ebrahim and Mr Atem John

For more information, please contact