Monthly Humanitarian Situation Report
South Sudan
Issue 3 | March and April 2023

Highlights

▪ Between 15 -30 April 2023, a total of 27,275 refugees and returnees were reported to cross into South Sudan as a result of the Sudan crisis between opposing military factions, (the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF)). This has added extra burden on the already fragile health system especially in areas with high number of returnees and refugees.

▪ The Government of South Sudan declared chorea outbreak in Malakal county, Upper Nile State on 7 March 2023 following two (02) samples tested positive for Vibrio cholerae by PCR, one sample tested positive for Salmonella ssp, and one sample tested positive for Shigella ssp on 6 March 2023.

▪ On March 22, 2023, the national Ministry of Health was notified of clusters of cases and deaths of Acute Jaundice Syndrome in Wau. State MOH and WHO verified the alert and called for further investigations.

▪ Poor and crowded living conditions coupled with recurrent flooding and fragile health systems increased the likelihood of infectious and water-borne diseases such as cholera and hepatitis E within host communities and IDP camp settings.

▪ Measles outbreak is confirmed in 23 counties in 2022 and 14 counties in 2023.

▪ On 25 April 2023 the national measles vaccination campaign was launched, and by 30 April 2023, a total of 759,458 children aged 6 to 59 months were vaccinated in 62 counties. This translates to reaching 29% of the target population.

▪ More than 4.1 million (4,103,993) adults are fully vaccinated (30%) of total population, 67% of target population.

Overall, the humanitarian situation in South Sudan remains dire, with over 9 million of people in need of humanitarian assistance.

On April 15, 2023, fighting broke out between opposing military factions, (the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF)) in Sudan, leading to a growing number of refugees and returnees crossing into neighboring countries including South Sudan. As of 30 April 2023, some 27,275 refugees and returnees were reported to be in South Sudan, adding extra burden on the below optimum health system especially in areas with high number of returnees and refugees. Partners providing health services in these locations will need extra resources to provide the much-needed health services.

Wide spread of food insecurity has been experiencing by many and for years due to conflict, displacement, and extreme weather conditions. According to the United Nations, over 6 million people in South Sudan, more than 60% of the population, are facing severe food insecurity including 33,000 people in Catastrophe (IPC Phase 5) in Akobo and Fangak counties, Jonglei State and in Pibor County, the Greater Pibor Administrative Area.

The ongoing conflict has led to the displacement of millions of 2.3 million people. Violent clashes between armed cattle keepers and host community members resulting to vandalism, looting and attacks on health care.

Map showing Cholera affected areas, Malakal County, Upper Nile State, South Sudan
Several health crises, including outbreaks of diseases such as cholera, malaria, and COVID-19. The country's health infrastructure is weak, and access to healthcare is limited, particularly in conflict-affected areas.

South Sudan’s exposed floodplains and Nile Basin location render it especially susceptible to flooding. In upstream countries, rainfall elevates Lake Victoria and Lake Albert’s water levels, and increases the flow of other sources that feed the White Nile, which amplifies downstream flows in South Sudan. These factors, combined with intensified local precipitation and poor river management, further compound the flood risk in the country.

Emergency Response Activities

- **Coordination:** The Ministry of health through the leadership of the Honorable Ministry for Health, established a coordination structure for the ongoing influx of refugees and returnees crossing into South Sudan as a result of the Sudan Crisis that broke out on 15 April 2023. A national health sector response plan for the refugees and returnees has been developed to guide the response activities.

  With support from WHO, humanitarian partner coordination is supported at both national and subnational levels through weekly Emergency Responders Groups and bi-weekly Health Cluster meetings in the states. Two subnational cluster coordinators have been deployed Unity and Greater Upper Nile to enhance subnational cluster coordination. Further, technical officers were deployed to Malakal to support the cholera outbreak response in Malakal town and POC.

- **Provision of emergency health supplies:** WHO distributed around 8.8 Metric tons of Health Emergency kits (183 Emergency Health Kits) which can support 72,750 people for 3 months to eleven counties affected by humanitarian emergencies. Six Health Cluster Implementing partners were engaged.

- **Health service delivery:** WHO supported the provision of frontline health services in Malakal Cholera outbreak response. These include set up handwashing facilities at established ORP sites in the affected areas, surveillance through active case search at health facility and community levels, and laboratory services, IPC/WASH, and risk communication.

- **Support to nutrition response:** Distributed 143 SAM kits to support treatment of 7,150 children. Some R&R tools and guidelines were also distributing for treatment of SAM with medical complications.

- **Outbreak prevention and response:** The oral cholera vaccination campaign was officially launched on 16 March 2023. Some 54,538 people have been vaccinated both in the POC and Malakal town with a coverage of 82 % achieved so far. WHO supported the MOH in delivering 2000 OCV doses to Warjwok PHCC & Wau Shilluk PHCC where they also conducted supportive supervision of the vaccination exercise. WHO submitted a new request of 200,000 doses of OCV to the International Coordination Group (ICG) for additional oral cholera vaccines.

- **Surveillance and Rapid Health Assessment:** The Ministry of Health, WHO and partners enhanced surveillance, routine reporting and monitoring of weekly trends of priority diseases in emergency locations. In addition, WHO deployed 4 teams to conduct health related rapid assessment in areas refugees and returnees in hot-spot areas.

- **Water quality testing and surveillance:** Water sample testing was conducted in Bentui, Wau and Malakal for physical, chemical, and bacteriological parameters. In Malakal, 34 (59.6%) of the 57 water samples tested positive for coliforms, in Bentui; 24 (64.8%) of the 37 water samples tested positive for coliforms and whilst in Wau, 16 (59.2%) of the 27 water samples tested positive for total coliforms. The presence of coliforms is an indication that the water supply may have been contaminated with fecal matter or other harmful pathogens that may be associated to the ongoing Hepatitis E in Bentui and the recently in Wai and as well the cholera outbreak in Malakal. Further testing is required to determine the specific types of coliforms present in the water and the potential health risks associated with their presence.
Confirmed and suspected Outbreaks

Cholera Outbreak in Malakl County, Upper Nile

- The Ministry of Health declared chorea outbreak in Malakl county, Upper Nile Sate on 7 March 2023 following two (02) samples tested positive for Vibrio cholerae by PCR, one (01) sample tested positive for Salmonella ssp, and one (01) sample tested positive for Shigella ssp on 6 March 2023.
- As of 30 April 2023, a total of 1,332 cholera cases including 2 deaths (CFR- 0.15%) has been recorded since the onset of the outbreak in Malakal town and POC. Of the total number of cases, 493 (37%) are from the POC and 839 (63%) are from Malakal town.
- Children of age 1 – 4 years old are the most affected accounting for 642(48%) of the total cases reported followed by <1 years old 463(35%).

- Public health response implemented include:
  - Oral Cholera Vaccination (OCV) campaign was conducted, starting on 16 March 2023. A total of 54,538 people has been vaccinated (Malakal town and POC) with OCV achieving 82% coverage
  - WHO and partners continued to update and support data verification, harmonization, and analysis across the response pillars.
  - With technical support from WHO, surveillance was strengthened through enhanced laboratory capacity and joint active case search by both the National and State RRT teams at health facility and community levels in Malakal County.
  - Cholera case management in cholera treatment centers were enhanced. Risk communication and communication were also provided by humanitarian partners in both Malakal town and POC.
  - Mass Aqua tab and Pur purification, and blanket chlorination campaign of water points and households was conducted, in addition to the infection prevention and control (IPC) and water, sanitation and hygiene (WASH) activities.

Measles Outbreak

- The Measles outbreak was declared on the 10 December 2022, by the South Sudan National Ministry of Health.
- Data obtained from January 1, 2022, to April 02, 2023, shows that a total of 63 counties across all 10 States have reported at least one suspected measles case, with confirmed outbreaks in 37 counties (23 in 2022 and 16 in 2023 including 2 counties from 2022).
- Cumulatively, 6,046 suspected cases have been reported: 4,137 and 1,909 in 2022 and 2023, respectively. A total of 59 measles-related deaths (CFR) is 0.98% were reported since January 2022, with only 3 deaths among the lab-confirmed measles cases.
- Forty-five (45) counties have reported suspected measles cases in 2023, of which twenty-eight (28) counties have at least one confirmed case.

- Public health response implemented include:
  - Reactive vaccination campaigns were conducted in 22 counties (16 counties in 2022, 6 counties in 2023), with 858,274 and 984,539 children vaccinated respectively
  - On 25 April 2023, a national measles vaccination campaign was launched with 759,458 aged 6 to 59 months children vaccinated in 62 counties by 30 April 2023. This translates to 29% of the target population.
Hepatitis E Virus (HEV) Outbreak; Wau in Northern Bahr El Ghazal State and in Bentiu IDP Camp in Unity State

- On March 22, 2023, the national Ministry of Health was notified of clusters of cases and deaths of Acute Jaundice Syndrome in Wau. State MOH and WHO verified the alert and called for further investigations.
- As of 30 April 2023, a total of 142 cases of HEV were reported with 6 deaths (CFR 4.2%). Most cases (103, 89.6%) are from Nazareth Village, a cluster in Kosti village (3) and sporadic cases in three neighboring villages of Mutamadia (1), Taban (1), Massna (1) and Aturu in Jur river county (6).
- A persistent HEV transmission has been ongoing in Bentiu IDP Camp and the surrounding host community since 2019.
  - Cumulatively, 4043 cases and 27 (CFR, 0.7%) deaths were reported from 2019 to March 2023.
  - Forty-seven percent (47%) of the cases are female and 53% are male. There was zero (0) reported death since 2022
- Public health response implemented include:
  - Multi-cluster response coordinated and monitored through HEV Task Force is underway. Health and WASH cluster partners continue to conduct active case searches in locations with confirmed or suspected cases. Targeted WASH intervention, including distributing WASH supplies and health promotion is being undertaken.
  - HEV vaccination campaign was conducted in Bentiu IDP Camp; the first round with a coverage of 91% and the second round with a coverage of 82% among those aged 16-40 years (incl. pregnant women. 6. Risk communication and awareness are enhanced through household health promoters/hygiene promoters; radio talk shows and messaging.
  - Enhanced access to safe drinking water, sanitation facilities such as latrines, mass clean-up campaigns, regular water quality testing, and monitoring

For more details, find the weekly IDSR Bulletins here: [https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2023](https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2023)

Coronavirus Disease (COVID-19) Outbreak

- Cumulatively, 18,503 cases of COVID-19 including 138 deaths (CFR of 0.75) have been reported. The total number of samples tested is 505,740, translating to a crude positivity of 3.7%.
- Public health response implemented include
  - More than 4.1 million (4,103,993) adults are fully vaccinated (30%) of total population, 67% of target population. These include 440,238 persons that received booster COVID-19 doses
  - Around 2 million (1,821,678) people were vaccinated during the COVID-19 vaccination campaign in 80 counties.
Operational gaps and challenges

The operation response has been affected by several challenges such as:

- Limited funding to respond to numerous emergencies and needs.
- Weak coordination mechanisms at the sub-national level.
- Disruptive insecurity incidents and inaccessibility in conflict-affected counties.
- Huge operational costs measured against available donor funds
- Inadequate human resources for health service delivery at sub-national levels.

Budget

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<tr>
<th>Name of appeal</th>
<th>Required US $</th>
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<tr>
<td>WHE Operations</td>
<td>22 million</td>
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<td>COVID-19 Response</td>
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Key Donors

WHO South Sudan country office appreciates the support provided by all our donors to address numerous emergencies needs across the country. Please find below the list of our donors supporting emergency operations in South Sudan.

- The World Bank
- African Development Bank Group (AfDB)
- Central Emergency Response Fund (CERF)
- Contingency Fund for Emergencies (CFE)
- European Union Humanitarian Aid (ECHO)
- Foreign, Commonwealth and Development Office (FCDO)-UK
- Global Alliance for Vaccine Initiative (GAVI)
- Government of Japan
- United States Agency for International Development (USAID)
- European Union (EU)
- South Sudan Humanitarian Fund (SSHF)

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