



World Health Organization

Humanitarian Situation Report Issue # 40
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WHO Regional Director for Africa, Dr Matshidiso Moeti, planting a Mango Tree at Mary Help Hospital and College of Nursing in Wau. Photo: WHO

South Sudan

Emergency type: Humanitarian Crisis in South Sudan

7 MILLION
NEED
HUMANITARIAN
ASSISTANCE



1.91 MILLION
INTERNALLY
DISPLACED



2.47 MILLION
REFUGEES

HIGHLIGHTS

- The WHO Regional Director for Africa, Dr Matshidiso Moeti was in South Sudan on a four-day official visit from 20 to 23 October 2018. During her visit, together with H.E Dr James Wani Igga – Vice President, Republic of South Sudan officially inaugurated the first Public Health Emergency Operations Centre in Juba.
- On 21st October, 2018, a suspected EVD alert of a 32-year-old male from Hai-Sura, Northwest Yambio town was reported to Yambio State Task Force.
- Malaria remains the top cause of morbidity (66%) and mortality (34%) with 21 counties having malaria trends that exceed the expected levels.
- Integrated mass vaccination campaign against meningitis, measles, polio and Tetanus in Nasir County of Upper Nile State Hub concluded.

WHO FUNDING REQUIREMENTS 2018



3.9M FUNDED
16.9M REQUESTED (UNDER 2018 HRP)

MALNUTRITION

261 424 CHILDREN ESTIMATED TO BE SEVERELY MALNOURISHED

55 FUNCTIONING STABILIZATION CENTERS ACROSS COUNTRY

CUMULATIVE VACCINATION FOR 2018



933 541 OCV DOSES DEPLOYED IN 2018
1 974 959 # OF CHILDREN (6-59mths) VACCINATED AGAINST MEASLES
1 823 765 # OF PERSONS VACCINATED AGAINST MENINGITIS

RIFT VALLEY FEVER



58 TOTAL SUSPECTED HUMAN CASES

**Overview of
the
Humanitarian
crisis**

- The Peace Agreement signed in Addis Ababa on 12th September 2018 has brought in wide optimism that armed conflict will end and the humanitarian space will open up. A national peace celebration is being organized on 31 October, 2018 to show South Sudanese that war is over. This is a way to contribute to creating a suitable atmosphere for the implementation of the revitalized peace agreement and a confidence-building measure to show its commitment to the peace agreement. The celebration will be attended by the Government and opposition leaders, the IGAD leaders, and other leaders in the region.

**Event
Description/
Situation
update**

Biometric registration in Juba PoC site.

- On 23 October, the International Organization for Migration (IOM) reported that the biometric registration exercises in Juba PoC sites have been concluded. A total of 32,113 displaced people have been registered in Juba's two Protection of Civilian (PoC) sites. Fifty-five per cent of the overall population is children and youth under the age of 18. The registration data also indicated that more than 3,600 individuals left the PoC sites for unknown destinations.

Displaced People in need of humanitarian assistance

- According to the authorities in Boma state, over 3,000 vulnerable people are in dire need of humanitarian assistance in Labarap County. The group, which comprises mainly of women and children, were reportedly displaced in fighting related to cattle in the past month. Reportedly, twelve people were wounded and 12 children abducted during the fighting. Humanitarian partners in the region are following up on the report.

Gender based Violence (GBV) on the increases

- A Gender-based violence (GBV) partner in Leer has raised a concern about increased GBV cases and the lack of critical medical and other referral services for the survivors in Southern Unity. This follows a two-day SGBV training conducted for partners in Leer town from 17-19 October. More capacity support to the Central Unity partners is being requested.

Sporadic shooting

- On 22 October, sporadic shooting was reported at the food distribution site in Ding-Ding, Rubkona County, forcing humanitarian partners and civilians to flee the area. Reportedly, disagreements between two conflicting youth groups over biometric verification and food distribution caused the shooting. The food distribution exercise has been temporarily suspended until further notice.

Epidemiological Update

- In epidemiological week 42 of 2018, completeness and timeliness for IDSR reporting at county level was 74% while EWARN reporting from the IDP sites was 96%.
- A total of 23 alerts were reported in week 42. Of all the alerts verified none required response.
- Three suspect measles cases have been reported and investigated in Malakal PoC. Sample testing is currently underway.
- Suspected of Guinea Worm was reported and investigated in Pankot village, Langkap Boma at Alabek Payam in Tonj North County.
- During the week, malaria, bloody diarrhoea, measles, and acute watery diarrhoea were the most frequent infectious hazards reported.
- A suspected EVD alert of a 32-year-old male from Hai-Sura, Northwest Yambio town was reported to Yambio State Task Force on Sunday, 21st October, 2018.
- Malaria remains the top cause of morbidity and mortality accounting for 66.1% (65,972) of cases as of week 42, 2018. At least 21 counties in 6 hubs are currently having malaria trends that significantly exceed the expected levels. A total of 2,171,048 cases with 306 deaths have registered since week 1 of 2018.
- Currently, the ongoing outbreaks in South Sudan include Guinea worm in Rumbek Center and Rumbek North, Rift Valley Fever in Yirol East, Hepatitis E Virus in Bentiu PoC, and Rubella in Bor South, Measles in Juba - Al Mahad IDPs; and a possible malaria upsurge in 21 counties.
- No new HEV cases were reported in week 42. A cumulative total of 139 HEV cases (18 confirmed by PCR) have been reported in Bentiu PoC in 2018. Current response entails surveillance, case follow up, WASH and discouraging communities from using stagnant water for domestic and recreational purposes.
- For more information on Integrated Disease Surveillance and Response (IDSR) please click on this link <https://afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin>.



Integrated Disease Surveillance and Response Training held in Malakal. Photo: WHO



A group photo of the National Rapid Response Team Trained in Juba. Photo: WHO

Ebola Virus Disease preparedness

- The WHO Regional Director for Africa, Dr Matshidiso Moeti was in South Sudan on a four-day official visit from 20 to 23 October 2018. The objectives of her visit were to build on the current momentum to strengthen collaboration with the Government of South Sudan and with the international community at large, and position WHO in South Sudan as a key partner in supporting the country's health agenda. She held high level advocacy meeting, visited Wau State and also inaugurated the national Public Health Emergency Operations centre in Juba.
- As part of EVD preparedness the Ministry of Health has prioritized capacity building for Rapid Response teams in high-risk states targeting a total of 214 participants. A national training of National Rapid Response teams in Jubek for 40 participants (MoH, HLSS and IMC) was conducted with support from WHO and UNICEF. The training in Yei concluded with 30 participants equipped with knowledge and skills to support EVD alert investigation and response. The RRT training in Yambio, Malakal, Bor and Wau are scheduled for October 29th to November 2nd 2018, while for Torit training will be conducted from 3rd November to 7th November 2018.
- The national task force meetings continue to be held twice as week as planned. During the reporting week, two national taskforce meetings chaired by the Hon. Minister of Health and co-chaired by the Incident Manager were held on 23rd and 25th October 2018 at the PHEOC in Juba. The major themes of discussion included the various risk communication and community engagement activities in schools, churches, mosques, public places and communities. In addition, discussions have been initiated to improve the functioning and efficiency of the taskforce by reducing the number of meeting and strengthening the technical working groups.
- State level task force meetings are also ongoing. Three states' task force forwarded their weekly minutes of meetings. These updates were shared during EVD National Task Force meetings.
- As a risk mitigation against EVD importation, entry screening of travelers is ongoing at 14 sites with support from WHO, International Organization for Migration (IOM), SCI, World Vision International South Sudan (WVISS) and other partners. A cumulative total of 362,619 travelers have been screened at all the 14 border screening points.
- WHO has received an addition of 6 international consultants and 2 WHO international staff who will be deployed from 1 November to support the taskforce to enhance capacities for infection prevention and control, surveillance, laboratory and overall coordination of Ebola preparedness activities.
- WHO, UNICEF and SDDO facilitated Yei State Ministry of Health to conducted a four-day IPC/CM training for 21 clinicians (23-26th October 2018) as part of EVD preparedness.
- During the reporting week, WHO supported the sensitization of 50 community leaders and stakeholders in Yei River State on EVD – basic information on EVD, Hand Hygiene and PPE demonstration. The meeting aimed at enabling the community leaders to participate in disseminating correct information on EVD in order to demystify the myths and misinformation e.g. Ebola travels only by water or wind from DRC to South Sudan.
- Active rumour monitoring and mitigation is ongoing at all levels: In Yei WHO took lead in supported the SMOH (DG) to correct the media miscommunication that the Hon Minister had confirmed Ebola death in Yei River State. All states at high risk have active task force teams meeting weekly to strengthen EVD preparedness efforts and updates are reported at the NTF level.
- On 24th October 2018, WHO Torit donated the following emergency supplies to an NGO called OPEN operating mobile clinics and supporting health facilities in Kapoeta South and Kapoeta East. These included 1 Carton of pneumonia Kits B; 2 cartons of Malaria kits; 1carton of Malaria supplementary, 2carton-of Emergency delivery kits, 2carton



Delivery of assorted medical supplies to YST in Yambio

of cholera kits ORP; 10pc of Cary blair, 1Pc of triple packaging, 5 Ampules of TI Media, as well as Outbreak Investigation Guidelines, and IDSR Guidelines.

- WHO sub office in Yambio supported Yambio Support Team with assorted essential medical supplies which ranged from Antibiotics, IV fluids, antiseptic, other basic drugs and medical equipment to strengthen their capacity to respond to emergency cases and enhance its ability to of MCH and Pediatric Units to render quality services to mothers and children.
- Integrated Surveillance and Response (IDSR) training is ongoing in different states with support from WHO. In Upper Nile, the IDSR training for 20 participants was conducted from 23-27 October, 2018. Participants including Surveillance officers, clinicians and public health officers drawn from the counties of Malakal, Akoka, Balia, Pigi, Fashoda, Ogod (new) and Manyo attended. In Northern Bahr El Ghazal, 40 participants drawn health facilities were trained. The Mobile Medical Team was also deployed to support the IDSR trainings.
- The weekly EVD preparedness update report was developed and disseminated widely and can be accessed at this link. <https://afro.who.int/publications/weekly-update-ebola-virus-disease-evd-preparedness-south-sudan>

Expanded Program on Immunization

- Integrated mass vaccination campaign against meningitis, measles, polio and Tetanus in Nasir County of Upper Nile State Hub concluded. Out of the 76,124-people targeted for Meningitis, 32,176 were immunized translating to 42% coverage; Measles targeted 20,962 and 11,831 (56%), were immunized, Polio targeted 22,065 targeted and 20,609 were immunized (93%) while 27,581 women of child bearing age of were targeted and 16,075 were immunized (58%). The Integrated Mass vaccination in Ulang was completed on 26 October, data being compiled.
- In preparation for the upcoming 3rd round of National Immunization Days (13-16 November), capacity building for micro planning for NIDs was conducted in Rubkona County benefitting 40 participants including Community leaders, CHD and partners. Two community sensitization meetings were conducted in week 43 in Rubkona and Panrieng counties to sensitize the community on NIDs.
- In Northern Bahr el Ghazal, WHO along with the state hub and field supervisors conducted on job training of 32 health workers on AFP, measles and NNT surveillance during the Integrated Supportive supervision.
- The National Polio Expert Committee (NPEC) meeting reviewed the AFP cases with inadequate parameters and classified 1 case in Eastern Equatoria State as Polio compatible. Response will be combined with the upcoming Polio campaign in November.

Nutrition

- To address the capacity gap in management of SAM among health workers, WHO together with AMREF conducted a 6-day training on impatient management of severe Acute Malnutrition with medical complications for 53 health workers drawn from the County Health Department and Health facilities, AMREF Health Science Training Institute in Maridi State.

Malaria

- WHO continues to monitor incidence trends, and responding to drug stock outs with a focus on Northern Bahr El Ghazal, Upper Nile, Western Bar El Ghazal, Warrap and Lakes. The Global Health Supply Chain is in the process of delivering ACTs to Aweil Centre in Northern Bahr el Ghazal.
- The humanitarian operations continue to be hampered by insecurity limiting access, poor road network, floods, and bureaucracy at all levels.

Operational gaps and challenges

**Resource
mobilization**

Financial Information:

- The total recorded contributions for WHO emergency operations amounts to US\$ 3.9 million* for the financial year 2018 as of 28th October, 2018.
- The Ebola Preparedness plan for WHO has received \$1,270,409 (Core funds, CFE, DFID, Canada).
- 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 finding gap are ongoing.

FUNDING STATUS OF APPEALS US\$				
	NAME OF THE APPEAL	REQUIRED FUNDS	FUNDED	% FUNDED
WHO	Humanitarian Response Plan	\$ 16.9 million	\$ 3.9 million	23%
	Ebola Preparedness	\$ 5.5 million	\$ 1,270,409	13%

The operations of WHO in South Sudan are made possible with generous support from the following donors:



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