

South Sudan: Bi-Weekly Humanitarian Situation Report

Emergency type: Humanitarian Crises

Issue 16 | Date: 16 September- 30 September 2021

KEY FIGURES

| | |
|-----------------------------------------------------------|------------------------------------------------------------------|
| 8.3 M People in Need of Humanitarian Assistance | 2.3 M South Sudanese Refugees in neighboring countries |
| 1.6M Internally Displaced People (IDP) | 1.4M Malnourished Children |
| 125K Persons living in PoC ¹ | 483K Malnourished Women |
| 77 Stabilization Centers | 7.2M Severely Food Insecure |

COVID-19 Response

| | | | |
|----------------------------------|----------------------|----------------------------------|-----------------------------|
| 12 401 confirmed cases | 130 deaths | 233 766 samples tested | 11 617 recoveries |
|----------------------------------|----------------------|----------------------------------|-----------------------------|

IPC PHASE 5

| | |
|----------------------------|-------------------------------|
| 108 000 targeted | 6 Counties affected |
|----------------------------|-------------------------------|

Flooding

| | |
|--------------------------------|--------------------------------|
| 623K People affected | 27 Counties affected |
|--------------------------------|--------------------------------|

HIGHLIGHTS

- A cumulative of 12 401 COVID-19 confirmed cases and 130 deaths (case fatality rate, 1.1%) have been reported in South Sudan since 5 April 2020.
- Humanitarian partners suspend their response operation and relocate 70 humanitarian personnel from Pibor following a threat from a youth group.
- Flooding that had started in May 2021 has affected more than 623 000 people in 27 counties across eight states.
- The South Sudan Humanitarian Pooled Fund (SSHF) launched a US\$20 million reserve allocation to support emergency response for flood-, conflict-affected locations and Hepatitis E Virus outbreak in Bentiu IDP Camp.
- SSHF has allocated \$2.8 million under reserve allocation for HEV outbreak response by WASH, health and other clusters.

| | |
|----------------------|-----------------------------------------------------------------|
| 121 066 (20%) | Children under one year vaccinated with oral polio vaccine |
| 962 158 | Initial numbers of children vaccinated against measles |
| 00 | Counties with confirmed measles outbreaks in 2021 |
| 00 | PoC ¹ sites with confirmed measles outbreaks in 2021 |
| 01 | Counties with malaria cases surpassing their set thresholds |



Ministry of Health and stakeholders conducted a joint operational review of emergency response focusing on key pillars of health service delivery; health information; surveillance and outbreaks; and leadership and coordination in humanitarian response to identify and document best practices, gaps and lessons learned for effective response to emergencies.

¹ UN Protection of Civilians'

Overview of the Humanitarian Crisis

- **A threat against humanitarians in Greater Pibor Administrative Area (GPAA):** A youth group in Pibor has issued a letter to humanitarian partners in GPAA on 4 October 2021 demanding 30 humanitarian personnel to leave the area within 72 hours.
 - The youth group accused the humanitarian personnel from other parts of the country of taking their jobs. Consequently, 70 humanitarian personnel from different organizations have been relocated and humanitarian activities suspended.
 - A health partner supporting the only referral facility providing comprehensive emergency obstetric and neonatal care has suspended its activities following this threat.
 - This latest incident of youth interference will impact response operations for 100 000 vulnerable people.
 - Humanitarians have been threatened and attacked by youth in Renk in Upper Nile and Torit in Eastern Equatoria, and other locations since the beginning of the year.
 - The humanitarians continue to advocate for the protection and working environment to enable humanitarian action.
- **Sub-national violence continues to drive humanitarian crisis in parts of the country:** In Tambura, where 80 000 people were displaced by fighting since June, intermittent fighting continues to impact the safe delivery of assistance as humanitarian organizations are unable to access vulnerable people in many areas of the county.
 - The UN Mission in South Sudan has established a Temporary Operation Base (TOB) in Tambura to provide protection patrols to humanitarian convoys and the IDPs.
 - On 24 September 2021, the South Sudan Humanitarian Pooled Fund (SSHF) launched a US\$20 million reserve allocation of which \$8.1 million has been allocated to the ongoing response in Tambura and other counties hosting the IDPs.
 - In Tonj North and Tonj East, two of the highly food insecure counties, sub-national violence has displaced communities and led to the suspension of humanitarian response. Furthermore, parts of Tonj East County remain inaccessible because of flooding further compounding humanitarian needs.
 - Sub-national violence has been reported in Pibor, Nyirol and Akobo counties of Jonglei and Yei in Central Equatoria State.
- **Flooding in 2021:** Flooding that started in May 2021 has affected more than 623 000 people in 27 counties across eight states.
 - Jonglei and Unity States are the most affected accounting for 58% of the affected people. The other affected states include Upper Nile, Western and Northern Bahr el Ghazal. More than two-thirds of the flood-affected counties are facing high levels of food insecurity which deepens the humanitarian situation for the affected communities.
 - Physical access remained a major challenge for humanitarian organizations to assess and respond to the needs of flood-affected people.
 - New flood-affected locations include Juba County (6 146 households), Rumbek East (203 households) and Jur River County (14 200 households) and rapid assessments have been planned to verify the magnitude and the urgent needs.
 - Flood mitigation measures such as dykes have helped to reduce the impact of flooding in flood-prone locations like Pibor and Bor South. Construction of a 3km dyke is underway in Bentiu town, Rubkona County.
 - Under the recently launched SSHF reserve allocation, \$ 9.1 million have been earmarked for emergency response for the topmost flood-affected 14 counties. Health cluster partners will utilize these funds to scale health response and ensure consistent access to primary health services to the displaced and host communities cut-off from health services.

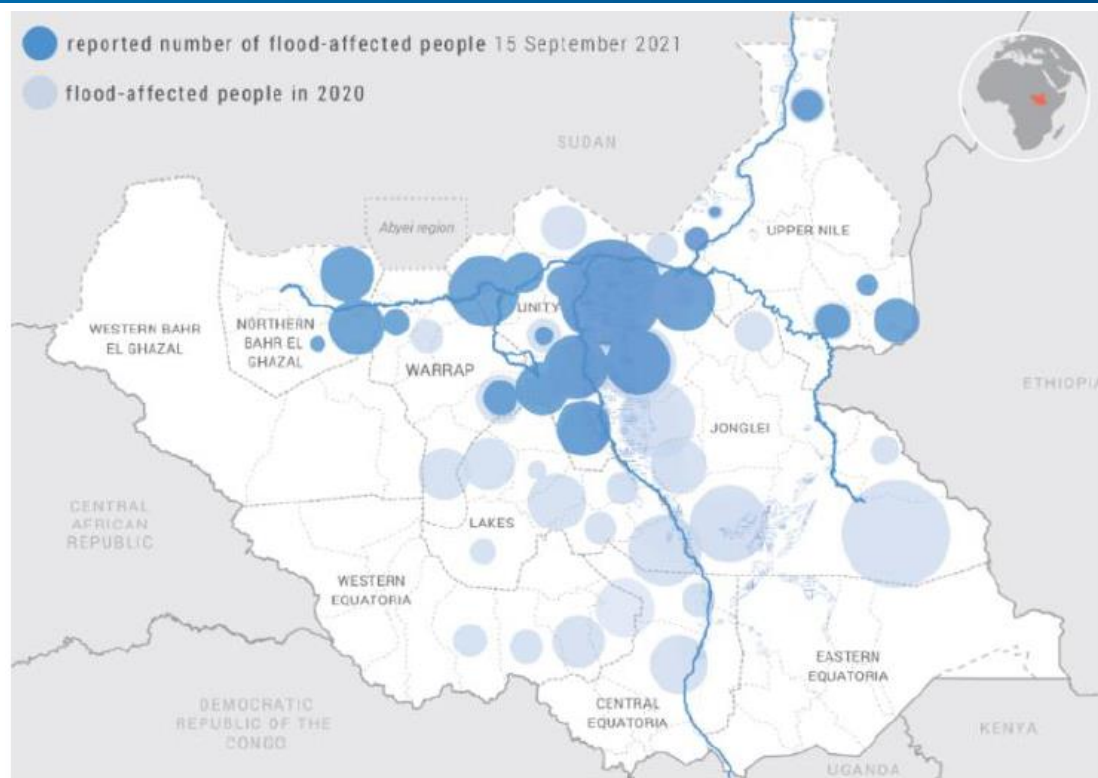


Figure 1: Flood-affected locations and populations across the states as of 15 September 2021 (by UN OCHA)

- **Food insecurity in South Sudan in 2021:** As per the Integrated Food Security Phase Classification report released in December 2020, 60% (7.2 M) of South Sudanese were projected to face high levels of acute (IPC Phase 3+) food insecurity during April-July 2021.
 - The six highly food insecure counties (Pibor, Akobo, Aweil South, Tonj North, Tonj South and Tonj East) with 108 000 people in IPC Phase 5 catastrophe have been targeted for a humanitarian response that has been underway since early 2021.
 - Many of the food-insecure counties are now flooded as extensive flooding affects 27 counties across eight states.
 - The Compounding effects of the multiple shocks- flooding, sub-national violence and increasing morbidities of infectious- to exacerbate the needs of the affected communities.

Emergency Response Activities

Public Health Actions by Health Cluster/WHO in Highly Food Insecurity, flood- and conflict-affected counties

- Health response for flooding, food insecurity and conflict-affected locations supported and coordinated through biweekly Health Cluster coordination meetings and weekly Emergency Responders meetings.
- WHO and health cluster partners supported rapid needs assessment in flood-affected counties to establish critical health needs and gaps.
- Emergency funding to be available to Health Cluster partners from SSHF Reserve Allocation for seven priority flood-affected counties as well as conflict-affected counties of Tambura, Ezo, Nzara and Yambio.
- WHO expected to receive funds for corepipeline support to continue providing emergency health kits and supplies to responding partners.
- As part of food insecurity response, WHO prepositioned 375 WHO Health emergency kits (248 IEHK, 87 cholera investigation and treatment kits, 22 pneumonia kits) in its hub offices that can serve around 249 000 people for three months. In addition, 132 kits (84 IEHK, 7 cholera kits, 8

pneumonia kits and 33 kits for management severe acute malnutrition with medical complications in under-5 children) were distributed to various health partners in the food insecure priority counties of Akobo, Pibor, Tonj East, Tonj North, Tonj South, and Aweil South.

- Implementing partners conducted mobile outreaches in response locations. WHO Deployed mobile teams to Pibor, Akobo and Duk to provide essential integrated health services through mobile outreaches. Overall, 534115 OPD consultations were conducted in IPC 5 locations as of week 39 2021.
- Weekly trends of the priority diseases and reporting via Early Warning, Alert and Response System (EWARS) are being monitored to enable timely detection and response to disease outbreaks.

Surveillance, Epidemiological Update, and Response for Disease Outbreaks

Confirmed and suspected Outbreaks

Hepatitis E Virus (HEV) Outbreak in Bentiu IDP Camp

- Cumulatively, 1 147 cases and nine (case fatality rate, 0.8%) deaths have been reported since 2019 as of the end of epidemiological week 37, 2021. Twenty-three new cases were reported in epidemiological week 37, 2021.
- All the cases were managed as outpatient cases except for seven cases that were admitted
- The persistent transmission is attributed to the main drivers for transmission that include insufficient access to safe water, sanitation and hygiene services, and inadequate access to essential healthcare services in the camp.
- There is a risk of disease spread to the communities outside the camp because of population movement and displacement due to flooding.
- SSHF has allocated \$2.8 million under reserve allocation for HEV outbreak response by WASH, health and other clusters. The outbreak response will be guided by the multisectoral response strategy that outlined critical response interventions under WASH, surveillance, case management and coordination pillars.
- Microplanning is underway to conduct Hepatitis E vaccination targeting 28 500 individuals aged 16-40 years with three doses of HEV vaccine.
- For more details, find the weekly IDSR Bulletins here:
<https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2021>

Coronavirus disease (COVID-19) Outbreak

- Since the beginning of the outbreak, 12 041 cases including 427 imported cases and 130 deaths (case fatality rate of 1.1%) have been reported as of 03 October 2021.
- Health workers accounted for 2.4% (286 health workers) of those infected with the SARS-COV-2 virus.
- Average positivity yields increased for five consecutive epidemiological weeks, reaching 3.3% in week 35 before falling to 2.5% in week 39.
- Three variants of concern (Alpha [B.1.1.7], Beta [B.1.351], and Delta [B.1.617.2]) have been identified in the country, with the Delta variant being the predominant (93%) variant.
- Vaccination for the 59,520 doses of AstraZeneca received from France was concluded on September 30. Further, national TOT training on the J&J vaccines was completed in Week 39 with vaccination expected to start in Week 41 targeting all 80 counties in the country.
- 112 496 (80 605 first dose and 31 891 fully vaccinated) people have been vaccinated against SARS-COV-2 as of 5 October 2021. Gender disparity in vaccine uptake has been noted with women constituting only 26.4% of the vaccinated.
- For more information on the COVID-19 outbreak and public health response measures, refer to the national weekly situation update: <http://moh.gov.ss/covid-19.php>

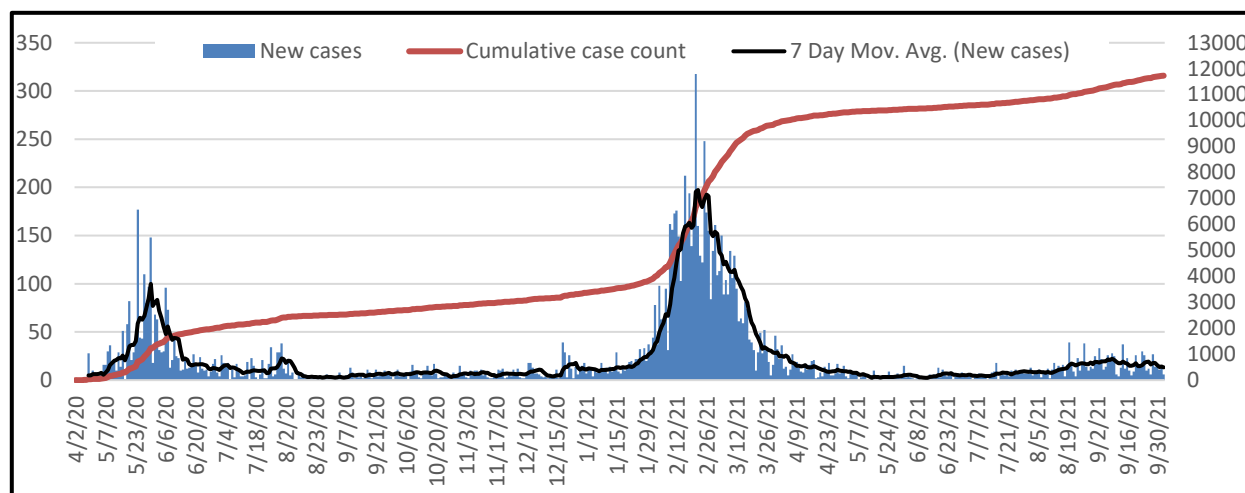


Figure 2: Epidemiological curve of reported cases through Week 39 of 2021, showing new cases (blue bars), rolling monthly average of reported cases (black line), and total cumulative reported cases (yellow line)

Operational gaps and challenges

- 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 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 Foreign, Commonwealth and Development office (FCDO)- UK
- 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

Dr Fabian NDENZAKO
WHO Country Representative
Email: ndenzakof@who.int

Dr Guracha ARGATA
WHO Health Emergency Team Lead
Email: guyoa@who.int