



armed groups clashed and led to the displacement of an estimated 21 000 people to Kodok, Fashoda County. The conflict expanded to Manyo County on 2 December 2022 displacing some 5 000 people in Melut County. In addition, some 2600 people were displaced to Malakal Protection of Civilian (PoC) and an estimated 3000 people were displaced to Sudan. Cumulatively, 22 000 people have arrived at the Malakal PoC site since the outbreak of violence in Tonga in mid-August, leading to congestion in an already overcrowded site. The sub-national violence that erupted in mid-August 2022 in Tonga and neighboring areas in Panyikang, Upper Nile State caused the displacement of 28 000 people to multiple locations.

### Emergency Response Activities

- **Coordination:** Partner coordination is supported through weekly Emergency Responders Groups, and bi-weekly Health Cluster and Inter-cluster coordination meetings. Further, technical officers were deployed to conduct needs assessments in newly affected locations to guide humanitarian response.
- **Provision of emergency health supplies:** WHO distributed 72 IEHK kits, 30 cholera treatment and investigation kits and 400 cholera RDTs to four implementing partners in six counties during the reporting period. Cumulatively, WHO has distributed 85 SAM/MC kits, 1324 IEHK kits, 70 pneumonia kits, and 294 cholera investigation and treatment kits to health facilities and implementing partners in priority locations. The kits can support 1.4M people for three months.
- **Health service delivery:** WHO supported the provision of primary health services in Leer, Mayendith, Pibor and Fangak (counties with IPC 5 populations) by supporting 11 static and mobile health facilities in collaboration with implementing partners.
- **Capacity building on case management:** WHO trained 60 health workers (30 clinicians and 30 Boma Health workers) on case management of common diseases in flood-affected and food-insecure counties. Overall, 287 frontline health workers received case management training while 210 Boma Health Workers received refresher training in locations affected by acute food insecurity, flooding and conflicts.
- **Support to nutrition response:** 62 health workers trained on the management of severe acute malnutrition with medical complications (SAM-MC) in Warrap, Northern Bahr el Ghazal and Unity states. National guidelines on inpatient management for SAM were distributed to 26 stabilization centers in priority locations.
- **Outbreak prevention and response:** Planning for the second round of the pre-emptive oral cholera vaccination campaign in Malakal County and Malakal PoC is underway. Overall, a total of 1.6 million doses of oral cholera vaccines were administered in six (Rubkona/Bentiu IDP Camp, Leer, Juba, Awerial, Yirol West and Malakal/Malakal PoC) cholera hotspot locations in 2022.
- **Surveillance:** Enhanced surveillance, routine reporting and monitoring of weekly trends of priority diseases in emergency locations.

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

#### Confirmed and suspected Outbreaks

##### Cholera Outbreak in Bentiu-Unity State

- No cholera cases were reported from Rubkona since epidemiological week 42 of 2022.
- The outbreak was confirmed in Rubkona County after the identification of the index case on 19 March 2022 in Bentiu IDP Camp. Cumulatively, 424 (30 culture-confirmed) cases and one death (case fatality rate, CFR, 0.24%) have been reported since the beginning of the outbreak.
- Public health response implemented include:

- Coordination through taskforce at national and subnational levels, case management, community awareness and case detection and investigation.
- Cholera kits were deployed and distributed to the health facilities (333 stool samples were collected and tested for *Vibrio cholerae*).
- Conducted pre-emptive oral cholera campaigns in hotspot locations: more than 1.6 million doses administered in six hotspot locations.
- Planning to conduct an after-action review for the response.

### Measles Outbreak

- The Ministry of Health declared a measles outbreak on 11 December 2022 after outbreaks were confirmed in 22 out of 80 counties. An increasing number of counties continue to report measles cases as the transmission spreads across the country. The most recent outbreaks were confirmed in Cueibet and Yirol West counties in Lakes State, Melut in Upper Nile State and Nyirol in Jonglei State.
- Cumulatively, 2471 cases including 243 laboratory-confirmed cases and 31 deaths (case fatality rate of 1.3%) have been reported from epidemiological week 1 to 49, 2022
- The transmission remains active in 18 counties as counties and partners continue to implement outbreak response interventions.
- The surge in measles transmission is related to the accumulation of susceptible children due to low routine vaccination coverage.
- Public health response implemented include:
  - Reactive measles vaccination campaigns have been implemented in 15 counties. The vaccination campaigns are underway in Rubkona and Juba counties.
  - Some 740 685 children aged 6 months to 14 years have been vaccinated during reactive campaigns.
  - Provided supportive case management including vitamin A supplementation.
  - Enhanced surveillance for case detection, investigation, and management.
  - Strengthening of routine immunization through mobile outreaches.

### Hepatitis E Virus (HEV) Outbreak in Bentiu IDP Camp

- From epidemiological weeks 45 through 48 of 2022, a total of 114 new HEV cases have been reported from Bentiu IDP Camp and Rubkona County.
- A persistent HEV transmission has been ongoing in Bentiu IDP Camp and the surrounding host community since 2019.
- Cumulatively, 3703 cases and 27 deaths (CFR, 0.7%) were reported from 2019 to 2021. One new death was reported on 20 November 2022.
- HEV transmission has reduced from a peak of 60 cases every fortnight by week 8, 2021 to 39 cases every fortnight by week 43, 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 to break the chain of transmission was conducted in March 2022 during which 24469 (91%) people were vaccinated in the first round while 19861 (82%) were vaccinated in the second round of the campaign. The third round of the campaign has been conducted in October 2022.

For more details, find the weekly IDSR Bulletins [here: https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2021](https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2021)

### Coronavirus disease (COVID-19) Outbreak

- As of the end of November 2022, 18 361 COVID-19 cases, 18 115 recoveries and 138 deaths (CFR of 0.75%) have been reported.
- Detection and testing of COVID-19 are inadequate. The testing level is low at about 300 per day. Antigen rapid testing, PCR testing and GeneXpert platforms in public health and private facilities are being utilized to scale up testing capacity in the country.
- Over 201 million individuals (15.36% of the target population) have been fully vaccinated using different antigens delivered through several vaccination strategies. Notably, more than 91.3% of healthcare workers have been 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>

### Sudan Ebola Virus Disease (SUDV)

- Uganda has been responding to an Ebola disease outbreak caused by the Sudan virus for more than 12 weeks and the interventions being implemented are gradually producing significant results toward controlling the outbreak.
- The number of districts affected by the outbreak remains unchanged at 9 districts with a cumulative 142 confirmed cases and 55 (39%) deaths.
- The risk for SUDV importation into South Sudan remains high as the outbreak in Uganda remains active.
- South Sudan continues to ramp up its readiness measures in the high-risk states of Eastern, Western and Central Equatoria that share a long porous border with Uganda. Notably, Ebola Treatment Units (ETUs) have been set up in Nimule, Juba, Yei and Yambio.
- Coordination structures have been activated, and point of entry screening scaled up and operationalized in Nimule and Juba.
- Laboratory capacity to test and confirm Ebola samples has been enabled at the National Public Health Laboratories in Juba.
- Since September 2022, 30 alerts detected and investigated in South Sudan. No SUDV cases have been confirmed in South Sudan.
- It is recommended that sustainable preparedness and readiness measures continued to be implemented in all high-risk areas to strengthen the country's capacity to respond to potential in-country or imported outbreaks.

### 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

Name of appeal	Required US \$	Secured in US \$	Gap in US \$
WHE Operations	<b>22 million</b>	<b>5 million</b>	<b>17 million</b>
<b>COVID-19 Response</b>	<b>9.7 million</b>	<b>7 million</b>	<b>2.7 million</b>

### 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 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)
- Foreign, Commonwealth and Development Office (FCDO)-UK
- Global Alliance for Vaccine Initiative (GAVI)
- Government of Japan
- United States Agency for International Development (USAID)
- South Sudan Humanitarian Fund (SSHF)
- World Bank

### FOR MORE INFORMATION, PLEASE CONTACT:

**Dr Fabian NDENZAKO**  
WHO Country Representative  
Email: [ndenzakof@who.int](mailto:ndenzakof@who.int)

**Dr Aggrey Bategereza**  
WHO Health Emergency Team Lead  
Email: [bategerezaa@who.int](mailto:bategerezaa@who.int)

**Dr Diba Dulacha**  
Health Operations and technical expertise  
Email: [dibad@who.int](mailto:dibad@who.int)