

Humanitarian Situation Report Issue # 5 28 JANUARY – 3 FEBRUARY, 2019



The launching of the Ebola vaccination exercise for health care and frontline health workers in Yambio. Photo: WHO

South Sudan

Emergency type: Humanitarian Crisis in South Sudan



7MILLION
NEED
HUMANITARIAN
ASSISTANCE



1.96 MILLION
INTERNALLY DISPLACED
WITH 0.2 MLLION IN
PROTECTION OF CIVILIAN
SITES



2.47 MILLION
SOUTH
SUDANESE
REFUGEES IN
NEIGHBOURING
COUNTRIES

HIGHLIGHTS

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

1 996 655

OF CHILDREN (6-59mths)
VACCINATED AGAINST MEASLES

1 872 971

OF PERSONS VACCINATED AGAINST MENINGITIS

HEPATITIS E



169 TOTAL SUSPECTED CASES (18 CONFIRMED)

- The Ebola vaccination exercise targeting over 2000 healthcare and frontline workers successfully launched in Yambio on 28 January, 2019.
- Four separate measles outbreaks were reported in Gogriel West (18 cases, 3 confirmed), Pibor (5 cases, 3 confirmed), Aweil Center (12 cases) and Yirol East (25 cases) counties. A response plan including a reactive vaccination campaign is underway for both Gogriel West and Pibor counties.
- A scoping mission for Universal Health Coverage (UHC)
 was conducted for South Sudan from 27 January to 2
 February 2019. The mission reviewed the South Sudan
 health system interventions towards attainment of UHC
 and other health related SDGs and health security.
- On 19 January, a UXO explosion was reported in Lieudiet village (about 8 km from UNMISS base) in Bor town in Greater Upper Nile injuring six people who later received treatment at Bor hospital.

Overview of the Humanitarian crisis

- The protracted conflicts persistently being experienced in some parts of the country and associated economic decline have eroded the country's ability to provide consistent basic services to its people. Currently, one primary health centre serves an average of 50,000 people. Only 40 per cent of nutrition treatment centres have access to safe water, a gap that puts more vulnerable people, particularly women, boys and girls, at risk of malnutrition and diseases. Only about one in five childbirths involves a skilled health care worker and the maternal mortality ratio is estimated at 789 per 100,000 live births.
- There are sporadic incidents reported in different locations that include Guerrilla type of warfare being waged by NAS in Yei River State and nearby counties; SSPDF launched a major offensive against NAS in Yei displacing a substantial number of IDP's; Inter-Communal Fighting still poses a threat to UN and other humanitarian personnel in Jonglei and Lakes States; criminality in Juba still continuous and victimizing UN/INGO Staff Members. The dry season has come and roads are now mostly passable, however, it also allows for the onset of the "fighting season".

Event
Description/
Situation
update

Inter-agency mission delivered humanitarian assistance.

On 17 January, 2019, an inter-agency team provided humanitarian assistance, which
included assorted item: soap, buckets, collapsible jerry cans, mosquito nets, plumpy
nut and high energy biscuits, to about 1,800 displaced people in Lirangu, Nagero
County, Western Equatoria. During the mission, children under age 5 were screened
for malnutrition and immunized against polio.

Unexploded Explosive Ordnance (UXO) explode

 On 19 January, a UXO explosion was reported in Lieudiet village (about 8 km from UNMISS base) in Bor town in Greater Upper Nile. Six people were injured and received treatment at Bor hospital. The mine action team responded and invested the incident. Preliminary report indicates that there was a fire in the area that is attributed to the cause of the UXO explosion.

Trucks transporting humanitarian supplies face bureaucratic impediments.

• On 22 January, a food convoy comprising two UN agency trucks and 45 commercial trucks was stopped at a National Security Service (NSS) checkpoint in Aleychock, approximately 20 km on the Wau-Kuajok road. The soldiers at checkpoint demanded payment for the commercial trucks. The convoy was later allowed to pass the checkpoint following a discussion with the relevant authorities in Wau. A similar incident took place at the same checkpoint two weeks earlier. To prevent recurrence of such incidents, partners have been encouraged to inform in advance relevant authorities, including the RRC Director, of their plan to move supplies.

Epidemiological • Update

- In epidemiological week 4 of 2019, completeness and timeliness for Integrated Disease Surveillance and Response (IDSR) reporting at county level was 59% while EWARN reporting from the Internally Displaced Population (IDP) sites was 69%.
- A total of 17 alerts were reported in week 4. The teams verified 82% of the alerts, and 6% required a response.
- A suspected EVD case was reported in Nimule on 30 January 2019. The suspected
 case is a 22-year-old Congolese (DRC) man who came from Goma. The samples tested
 negative for both the GenXpert analysis at the National Public Health Laboratory and
 the PCR results from UVRI for Ebola, Marburg, CCHF and RVF.
- Four separate Measles outbreaks were reported in Gogriel West (18 cases, 3 confirmed), Pibor (5 cases, 3 confirmed), Aweil Center (12 cases) and Yirol East (25 cases) counties. A response plan including a reactive vaccination campaign is underway for both Gogriel West and Pibor counties.
- During the week, measles, malaria and acute watery diarrhea were the most frequently reported infectious hazards.

- Malaria continued to be the leading cause of morbidity accounting for 50.3% of all
 cases in week 04, 2019. The trend analysis showed at least 6 counties in two state
 hubs having malaria trends that are significantly higher than the expected levels.
 These counties include: Rumbek hub (Rumbek center, Rumbek East), Kuajok hub
 (Gogrial West, Tonj South, Gogrial East, Tonj East).
- For more information on Integrated Disease Surveillance and Response (IDSR) please click on this link: http://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin.

WHO Public Health response

Ebola Virus Disease preparedness and response:

The vaccination of health care and frontline workers against Ebola, was successfully launched on 28 January in Yambio. A high-level team comprising of the Hon. Minister of Health, the WHO Country Representative to South Sudan and representatives from other partner agencies visited Yambio to launch the EVD vaccination exercise. 228 Health Care and Frontline health workers have so far been vaccinated in Yambio (Yambio State Hospital, Yambio PHCC, Nabagu PHCU, Diatora PHCU, Saura PHC



A health worker in Yambio State Hospital signing the consent form before taking the Ebola vaccine. Photo: WHO

Nabagu PHCU, Diatora PHCU, Saura PHCU, Mangbondo PHCU and Raibodo PHCU). The exercise is still ongoing.

- Preparations to launch Ebola vaccination activity in Yei River State are ongoing preceded with a 2-day refresher training for vaccinators held on 2 – 3 February 2019.
 Vaccines and supplies were prepositioned in preparation for the Ebola vaccination in Yei planned to start on 4 February 2019.
- To strengthen the capacity to detect, investigate and respond to seasonal and pandemic influenza, WHO conducted a five-day influenza sentinel surveillance training in Juba from 28 January to 1 February, 2019 for 42 health workers including clinicians, laboratory experts, surveillance officers and data clerks, drawn from five selected health facilities in Juba. These health workers will be responsible for setting up and running the sentinel surveillance sites is selected health facilities and testing of samples in the National Public Health Laboratory (NPHL).
- During the reporting week, MoH, WHO and HPF partners embarked on the second phase of rolling out mobile reporting in health facilities in Juba and the greater Central Equatoria States. This phase aims to decentralize data collection and alert management further down to health facility level including integration of the public health laboratory network within the electronic surveillance system; and integration of the other types of data notably, population data, nutritional surveillance and supervisory visits.
- The national level Ebola task force continues to hold weekly meetings with the last one held on 31 January 2019 at the National Public Health Emergency Operations Center in Juba. State level Task Force meetings also were held and updates from Yei, Yambio, Jubek, Nimule and Maridi shared with the NTF.
- The World Food Program (WFP) is supporting WHO with the distribution of EVD case definition materials in Aweil, Bentiu, Bor, Kuajok, Rumbek, Torit, Malakal, Wau & Yambio.

- Cumulatively a total of 1,164,047 incoming travelers have so far been screened from the nineteen screening posts.
- The screening services are supported by WHO, IOM, SCI, WVISS and CAUMM.
- The weekly EVD preparedness update report was developed and disseminated widely and can be accessed at this link. https://bit.ly/2Lwkj5p.

Nutrition

- WHO distributed a total of 300 treatments to manage complicated severe acute malnutrition, in 5 stabilization centers embedded in PHCCs in Aweil, Nyirol, Fangak, and Maban counties. In addition, 20 stabilization centers in priority locations with high burden of acute malnutrition, food insecurity and morbidity were equipped with water life straws filters.
- WHO, in collaboration with ACF and the Nutrition Cluster, trained 11 participants from 11 partner organizations to develop their skills on water quality control systems in stabilization centers, to enable safe preparation of meals and reconstitution of therapeutic milk (F75 and F100), and use of water filters.

Immunization:

- The annual EPI review meeting, that included development of the 2019 annual work plan was held from 28 to 31 January, 2019. The meeting was attended by Director Generals from 30 states, 10 State EPI managers, WHO EPI officers, UNICEF field officers as well as officers from MOH and partners at national level. The Minister of Health stressed the need for ownership of the program and also integration with the Boma Health Initiative (BHI).
- The first batch of 6 mentees from the Ministry of Health EPI Capacity building program graduated on 31 January 2019
- A total number of 432 Acute Flaccid Paralysis (AFP) cases were reported in 2018 and 3 cases have so far been reported in 2019 from Central Equatoria State, Eastern Equatoria State and Lakes.
- The country continues to plan for the Polio campaign planned for the month of March targeting 65% of under 5 children in the country.
- Recently introduced Rota Sentinel Surveillance showed that out of 52 diarrhea cases
 8 reported were confirmed positive for rotavirus.

Integrated Service Delivery cluster/WHE

Following a request from MOH, a three level (WCO, AFRO and HQ) scoping mission for Universal Health Coverage (UHC) was conducted for South Sudan from 27 January to 2 February 2019. The mission reviewed the South Sudan health system interventions towards attainment of UHC and other health related SDGs and health security. The mission team together with MOH and other partners jointly came up with key recommendations and a road map for action towards attainment of UHC and resilient health system. Additionally, the recommendations will be used to draft the South Sudan health system recovery plan to support rebuilding of the health system.

Prepositioning of supplies

During the reporting week, the following supplies were prepositioned:

Five IEHK basic kits to Rajaf County and Magna in Duk –Fangak adequate to provide emergency health services to 5000 people; Five IEHK Malaria Kits and Five IEHK Supplementary kits to treat 35,000 cases of malaria; One Cholera ORP kit; 4 boxes of Life Strow; Seven SAM Kits to treat 350 Severely malnourished children with medical complication, Eight Blood donation chair to Juba Blood Donation Center,



Supplies being prepared for propositioning from WHO warehouse in Juba. Photo: WHO

Twenty TI media bottles and Twenty-five pieces of LP needles.

Updates from the States:

- In Lakes State, fighting erupted on 30th January, 2019 between Pakam (Rumbek) and Yirol East armed youths at Pagarau and Wunthou village, Yali Payam, Yirol East County. Nine (6) people were killed, 27 wounded. Unspecified numbers of people were displaced to Acigor, Alel. Arupnyiel, Nyang and Yirol town. SMOH in collaboration with WHO, and CUAMM carried out the following activities: referral of wounded people to the Yirol hospital, trauma case management, assessment of surgical supplies in the nearby facilities including the hospital, conducting disease surveillance and submission of daily updates to the hub.
- In Malakal, a join mission was conducted to Kodok, to meet the state authorities, to address issues related to IDPs and influx of returnees who are in need of crucial humanitarian assistants, non-food items, food, protection, health and nutrition. WHO plans to support SMoH, CHD and health implementing partners to ensure provision of integrated primary healthcare to attain universal coverage of basic services to villages, payams and counties.



WHO participating in a monthly Humanitarian Coordination meeting in RRC Compound, Rumbek.

Operational gaps and challenges

The humanitarian operations continue to persistently be hampered by insecurity limiting access, poor road network, floods, and bureaucracy at all levels.

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 1 January, 2019.

The Ebola Preparedness plan for WHO has received \$2.9million (Core funds, CFE, DFID, Canada, Germany).

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 unearmarked 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%
2	Ebola Preparedness	\$ 5.5 million	\$ 2.9 million	53%

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











This Humanitarian Situation Report has been developed with support from the following WHO Country Office Clusters: Emergency Operations, Health Information, Surveillance & Risk management, Disease Control, Integrated Services, Field Offices Coordination and Health Cluster Coordination.

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