**South Sudan**

**Emergency humanitarian situation report**

**Issue 23**

**15 September – 29 September 2013**

**HIGHLIGHTS**

During this reporting period;

- Three polio cases were detected and confirmed in South Sudan.
- WHO supported the state health authorities in Northern Bahr el Ghazal State and Eastern Equatoria State to conduct investigations of suspected polio cases which led to the eventual confirmation of the Wild Polio Virus in the two states.
- WHO commenced a mop campaign in Aweil South county in Northern Bahr el Ghazal state, Gogrial East in Warrap state and Ikotos and Budi in Eastern Equatorial state following confirmed two polio cases in Aweil South, and one Ikotos counties. This campaign will target 533,469 children in four counties in the 3 states.
- The organization also supported the health authorities in Upper Nile state to conduct measles outbreak investigations in Malakal Teaching Hospital.
- WHO also continued with the response to floods in different states by supporting with the much needed drugs and other medical supplies to fill the gaps.
- The agency also launched the construction of a new maternity wing in Wau hospital.

**Humanitarian Situation**

- The security situation in Jonglei State’s Pibor County remained calm but unpredictable. However humanitarian actors accessed some areas and resumed provision of humanitarian assistance in the areas of Gurmuk, Dorain and Labrab payams Pibor county in Jonglei state. The security situation in other counties remained relatively stable with no incidents reported.
- Heavy rains over the past week caused flooding in a larger part of the country. Humanitarian partners continued to respond to the needs of people affected by flooding. Partners assessed the affected areas and established up to 61,000 people to be in need of humanitarian assistance in accessible areas in Lakes, Northern Bahr el Ghazal, Upper Nile, Unity, Warrap and Western Bahr el Ghazal states.
- The country is currently facing outbreaks of measles in 14 counties, Hepatitis E in two counties of Maban and Yida in Upper Nile and Unity states respectively and the recent polio outbreak affecting two counties of Ikotos Eastern Equatoria State and Aweil South Northern Bahr el Ghazal state. The polio outbreak was declared a national health emergency by the MOH/RSS on Monday 30 September…2013

**Public Health Concerns**

- South Sudan has been polio free for the past 4 years since the last case reported in June 2009 marking the end of 2008-2009 outbreaks. However on Thursday 26th September 2013, the regional Polio reference laboratory in Nairobi (KEMRI) reported 3 cases of wild polio virus isolation. Two of the cases are from Aweil South County in
Northern Bahr el Ghazal State and one from Ikotos County in Eastern Equatoria State. The rapid review of the cases shows an age range of between 22 – 96 months, with a minimal vaccination status of six doses.

- Due to the increasing rains, flooding is expected to rise in many parts of the country. With the 61 000 people affected and in need of humanitarian assistance in accessible areas in Lakes, Northern Bahr el Ghazal, Upper Nile, Unity, Warrap and Western Bahr el Ghazal states, chances of contracting water borne diseases are high. This is mainly due to poor human waste disposal, in addition the persons displaced are also at a high risk of contracting respiratory tract infections.

- Cases of measles continue to be reported across the ten states, currently over 14 counties have reported cases and the responses are ongoing. A total of 38 cases were reported as indicated in the epidemiological data for week 38.

Health Situation

- The data in this section focuses on week 38. In this reporting period, a total of 56,906 health event cases and sixty nine (69) deaths were reported from 80% of the functional health facilities. Malaria accounted for 81% of the reported health events followed by acute watery diarrhea. Completeness and timelines of reporting in this period was at 80% and 50%. When compared to week 37, completeness of reporting remained the same while timeliness increased in week 38 to 50% from 42% in week 37.

Acute Watery Diarrhea (AWD)

- A total of 8,809 acute watery diarrhoea cases (Incidence rate of 106.6 per 100,000 population) were reported across the country, with nineteen (19) related deaths (CFR 0.22 %). Children below five years of age accounted for 80% of all the reported AWD cases. Figure 2 shows comparison of AWD cases and deaths from the ten states in Week 38. Upper Nile state reported the highest number of cases followed by Warrap. Jonglei, Northern Bahr el Ghazal State, Western Equatoria state, Central Equatoria, Lakes, Western Bahr el Ghazal and Unity states. Eastern Equatoria state recorded the least number of cases.
Measles

- Thirty eight cases (38) suspected cases of measles (incidence rate of 0.46 per 100,000 populations) with one related death were reported across the country. The overall incidence rate increased in week 38 as compared to week 37 (0.13 per 100,000 populations). The suspected measles cases were reported from Lakes state (12), Central Equatoria state (8), Unity state (5) and Northern Bahr el Ghazal (4).

Maternal and child Health

During this reporting period, the inauguration of the construction of Maternity wings in Yambio and Wau hospitals were conducted in Western Equatoria State and Western Bahr el Ghazal states respectively. In Wau hospital the event was graced by his Excellency the President of the Republic of South Sudan, His Excellency Salva Kiir Mayardit while in Yambio the event was inaugurated by the Hon. Dr. Riek Gai Kok, Minister of Health, South Sudan. Present also were WHO team including the Head of the country office, Undersecretary of Ministry of Health, the Canadian Ambassador, and the Governors of both Western Bahr el Ghazal and Western Equatoria States. The project is funded by the Canadian International Development Agency and implemented by WHO. The overall aim of the project is to contribute in the reduction of the high maternal and new born deaths in the Republic of South Sudan.

Response

- Following the samples collected during the week and sent to a reference laboratory in Nairobi, the reports of the Wild Polio Virus outbreak in Aweil South county, Northern Bahr el Ghazal state and Ikotos county, Eastern Equatorial state were confirmed. WHO in collaboration with other partners kicked off a mop up campaign for polio in the areas that reported the polio cases and in Gogrial West in Warrap state. In addition, the organization released 500,000 USD to support all the operational costs for the mop up campaigns. The agency conducted full detailed investigations of the confirmed cases in Ikotos and Aweil South counties. In Losite payam, a total of 3,034 children were vaccinated with oral polio vaccine during the visit.

- WHO supported the MOH to conduct three task force meetings to discuss the response and strategy to contain the current Polio outbreak. In a similar event, WHO supported the states to reconvene all emergency task forces at state level that are currently conducting regular meetings over the current polio outbreak.

- Following the declaration of the outbreak, WHO supported the State Ministries and the Central Ministry of Health to conduct the following activities; conduct a detailed investigation of cases and assessment of the situation in the affected areas, provide updates on the outbreak response plans, mop up campaigns in four counties of Aweil South, Gogrial West, Ikotos and Budi targeting all children less than 15 years of age.
Following reports of measles outbreak in Malakal county where 43 cases were reported and 10 of them confirmed, WHO supported the state with the response by providing 23,000 USD to ensure a successful measles campaign. The support is based on the micro plans received from Malakal county County Health Department (CHD). In addition, the agency supported the State Ministry of Health conduct detailed investigations of the cases reported at Malakal Teaching hospital. In Mayom county, the organization also continued supporting measles response by providing 23,000 USD towards a planned measles vaccination campaigns.

In order to strengthen the County Health Department’s response to health service delivery in Pibor, WHO supported the county department with tents to strengthen primary health services and ensure that the vulnerable population receive treatment. The tents are used as shelters for consultations of patients. In addition drugs and other medical supplies continue to be provided to Medair in Labrab and Dorain payams to ensure continuity of health services in these areas. In this reporting period, a total of 4,306 patients were attended to.

The organization also continued its support towards floods in all the affected areas of South Sudan. In Northern Bahr el Ghazal state, the organization supported the State Ministry of Health to cover gaps by providing an Inter Agency Emergency Health Kit (IEHK) to support people affected by floods in health facilities near Aweil town. This followed an assessment that was conducted in the flood affected areas in the Aweil town. Among the health facilities that benefited from the WHO support in Northern Bahr el Ghazal state, include: Awulic primary health care unit (PHCU), Akuem PHCU, Majok yinh thiou PHCU, Bakou PHCU, Madhol PHCU, and Mabok tong PHCU.

In response to the 120,000 persons displaced form the Abyei area, WHO supported Health cluster partners in Agok and Twic with antimalarials, rapid diagnostics test (RDTs) and sundries to support the delivery of health services in Agok. A total of 23,000 Rapid diagnostic tests, 3,000 antimalarial doses for children and 20,000 doses for adults were delivered to the Agok ministry of health to support populations displaced from the Abyei Administrative Area.

To enhance case management of common illnesses in Western Equatoria State, WHO supported the training of eighty health workers in Yambio Tambura, Mundri West, Maridi, Nzara Nageero, Mvolo, Mundri East, Ezo and Yiba counties. It is hoped that health workers trained will use the skills acquired to effectively support the management of cases of common but potentially fatal illnesses. In a related activity, a total of eighty one health workers were trained in Wau and Kuajok on case management of common illnesses as part of the WHO program on capacity building.

In order to highlight the burden of nodding disease in South Sudan, the agency worked closely with Praxmarer, a filming company in Austria to document the disease in Mundri West county Western Equatoria state. The team visited the villages of Bangolo, Diko and Torewade. It is hoped that the film will be broadcast in various TV stations and will help draw attention to the big problem of nodding disease in South Sudan. Nodding syndrome (NS), is a severely debilitating neurological condition that typically starts to affect children between the ages of 5 –15 years, causing progressive cognitive dysfunction, neurological deterioration, and stunted growth. The characteristic head nodding, a type of seizure, happens especially when children are presented with food and when they are cold. The affected children typically develop other types of seizures. Parents cannot leave them unattended for fear that they may wander off or injure themselves. Seizures in the late stages make it impossible for a child to eat. Death may result from starvation, accidents like drowning and falling into fires or from getting lost after wandering off.
Coordination and partnership

- In this reporting period, the organization participated in an interagency site visit to Gogrial town following reports from the government authorities that most areas in Alek, Gogrial as well and Tonj South were severely affected by floods causing damages to houses, crops and roads. During the assessments the team established that the road from Kuajok to Alek was cut off by floods and about five bridges damaged. The families displaced during the floods were found to be sleeping on the road side and higher ground. Those displaced are at high risk of contracting water borne diseases due to poor human waste disposal and also respiratory tract infections.

- WHO also participated in Inter-state border coordination meeting in Wau Western Bahr el Ghazal state. between Western Bahr el Ghazal and Warrap states. The Interstate border coordination meetings were to the discuss and share experiences on how to develop comprehensive village listing and mapping of the villages along the border of the two states.

- The organization continued supporting the Ministry of Health at both national and sub national levels to convene regular Epidemic Preparedness and Response (EPR) meetings to discuss outbreak and crisis response issues. In this reporting period, the EPR meeting focused on anthrax, and measles responses in the states. The threat of the Congo Crimean fever was also underscored.

Plans

- Participate in the mop up campaigns for the Wild Polio Virus in the counties of: Ikotos and Budi, Eastern Equatoria state, Aweil South in Northern Bahr el Ghazal state and Gogrial West in Warrap state.

- Conduct supplementary national immunization days in accessible areas due to raining season (it will cover the three Equatoria states and the accessible areas in the rest of the states. Targeting children less than 15 years of age. The tentative date is 22nd October).

- Participate in three (3) rounds of polio National Immunization Days during the period November to December 2013.

- Intensification of polio disease active case search active case search including screening of children and attending health facilities for other routine medical conditions(ongoing).

- Intensification of cross border collaboration with neighboring countries to lessen the likeliness of importation of the Wild Polio Virus in to the countries, synchronization of campaigns. Next week a meeting will be held in Kisumu with the Kenya health authorities.

- Strengthening routine immunization in high risk and low performing counties.

- Mobilization of additional resources from within and outside the country.

- Intensification of awareness and sensitization, strengthening partnerships with civil society and revitalization of national and state response team.

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