

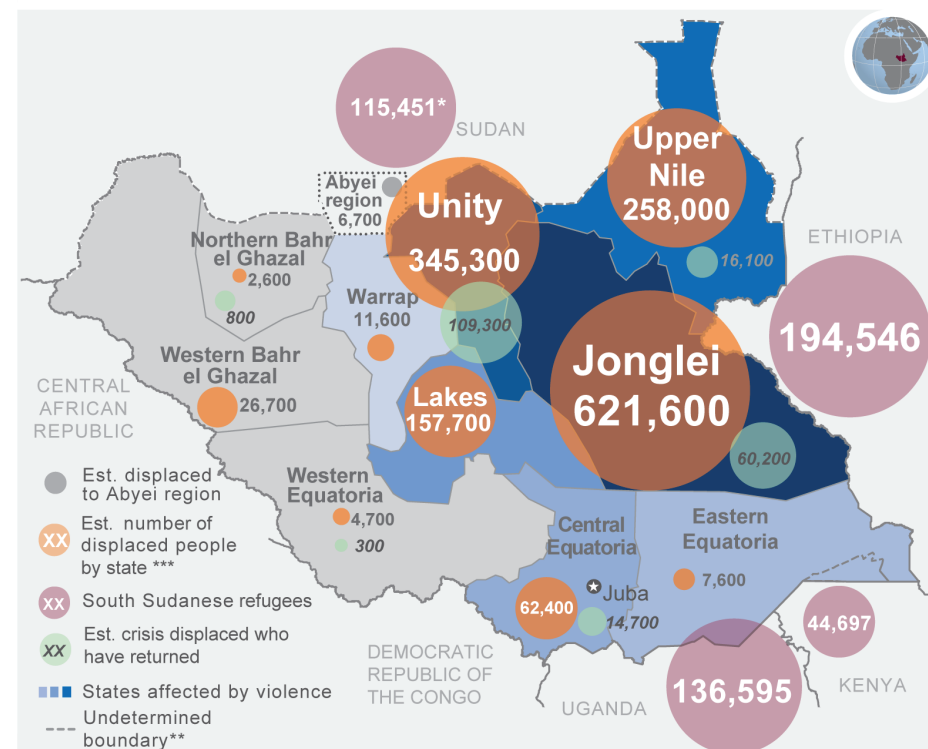
# South Sudan Crisis

Situation Report No. 69 (as of 8 January 2015)



This report was produced by OCHA South Sudan in collaboration with humanitarian partners. It covers the period from 2 January 2015 - 8 January 2015. This report uses planning figures from the 2015 Humanitarian Response Plan (<http://j.mp/SouthSudanHRP>). The next report will be issued on or around 16 January 2015.

## Highlights



- The 2015 Humanitarian Response Plan (HRP) aims to reach 4.1 million people with humanitarian assistance.
- Roads around the country are beginning to dry out. The latest road access map is available here: <http://bit.ly/1Ks0BIm>

The boundaries and names shown on this map do not imply official endorsement or acceptance by the United Nations. \*\*Final boundary between the Republic of South Sudan and Republic of Sudan has not yet been determined. Final status of the Abyei area is not yet determined. \*New arrivals from South Sudan (NOT REFUGEES). \*\*\*Verification of the IDP & returned figures is a work in progress (31 December 2014). Data Sources: OCHA, UNMISS, IOM, UNHCR, RRC and partners. Refugee figures as of 08 January 2015 OCHA South Sudan, 09 January 2015

**4.1 million**

People to be assisted by the end of 2015

**2.5 million**

People facing crisis/emergency levels of food insecurity

**1.5 million**

People internally displaced by conflict since December 2013

**\$600 million**

Required for life-saving assistance by February 2015

## Situation overview

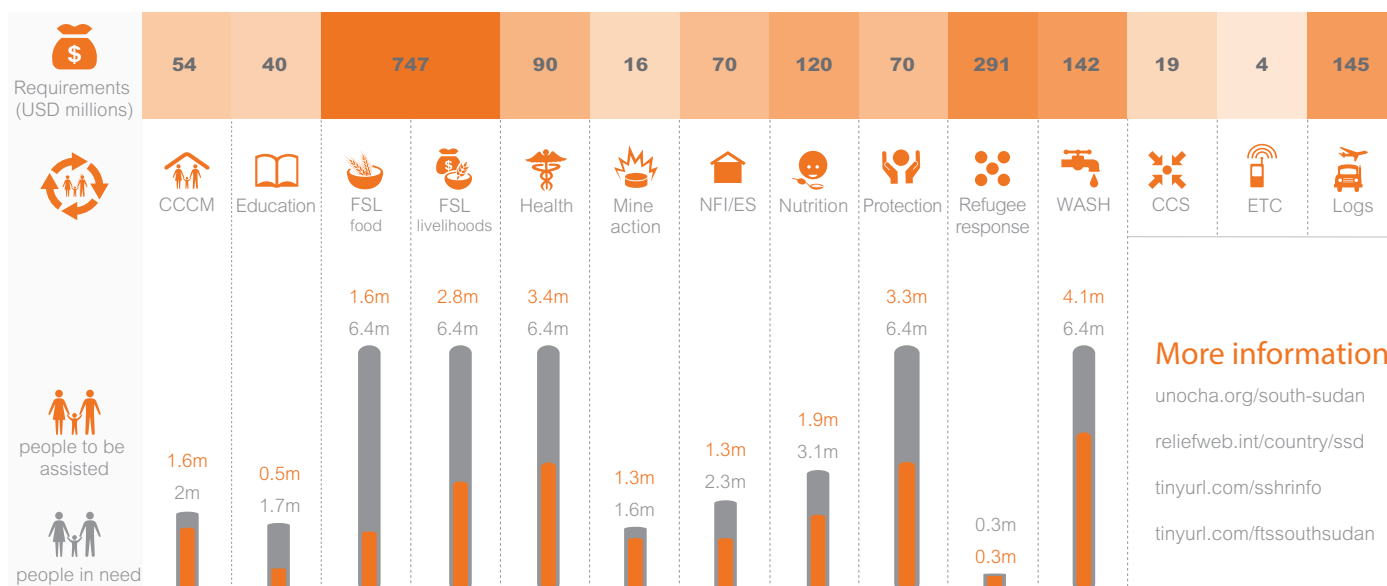
Some 1.5 million people are internally displaced inside South Sudan, and an estimated 2.5 million people are currently facing crisis or emergency levels of food insecurity.

During the reporting period, tensions remained high in Rumbek East, and sporadic shooting continued to be reported.

The security situation in Bentiu and Rubkona was tense throughout the week. On Tuesday, an estimated 400 people arrived in the PoC, fleeing fighting in surrounding areas. Due to exchange of fire in surrounding areas, including at Unity oil field, movement of aid workers to Bentiu town and the PoC was temporarily paused, as were flights, though both had resumed by Wednesday.

There were also reports of fighting in Nasser and Maban counties.

## Humanitarian response



### 2015 Humanitarian Response Plan

The 2015 Humanitarian Response Plan (HRP) can be found here: <http://j.mp/SouthSudanHRP>.

The HRP appeals for US \$1.8 billion to reach 4.1 million people with humanitarian assistance in order to save lives and alleviate suffering, protect the rights of the most vulnerable people, and improve self-reliance and coping capacities.

The number of people to be reached in each cluster is highlighted above, as is the appeal amount per sector. (Please note that the situation report will now use these figures as targets for reporting purposes.)

## Service clusters



### Logistics

#### Response

- **Supplies airlifted:** During the reporting period, 83 metric tonnes of humanitarian supplies have been airlifted on behalf of 11 different organizations to Akobo, Bentiu, Lankien, Maban, Malakal, Old Fangak, Panyagor, Pibor, and Turkei.
- The Logistics Cluster is currently loading cargo (300 mt) for ten humanitarian partners for **barge movement to Malakal/Melut**. Malakal cargo is fully loaded; cargo for Melut will be loaded from Bor to avoid any potential issues on the shallow route in-between Juba and Bor. All future barge movements will be dispatched from Bor instead of Juba.
- In preparation for the **dry season**, partners continue to be consulted regarding prepositioning plans. In line with the humanitarian community's integrated logistics and prepositioning plans, warehousing and transport support will be provided where required.
- **The cluster conducted an assessment mission in Melut** from 6-8 January; key findings will be shared with partners once the final report is made available.
- **The cluster is adding a Civil/Military Officer to the team** who will support dry season planning by liaising with UNMISS regarding convoys and any other related issues.

## Constraints

- **Poor road access due to rains:** Roads across the country are beginning to dry out. The latest access constraints map can be found here: [http://www.logcluster.org/sites/default/files/maps/lc\\_ss\\_774\\_currentroadclosures\\_20150102.pdf](http://www.logcluster.org/sites/default/files/maps/lc_ss_774_currentroadclosures_20150102.pdf)
- **The key route from Bentiu via Mayom is beginning to dry out.** The Logistics Cluster is following up with partners operating in this area to get the most up to date information on the road's status.

## Response clusters



### Food Security and Livelihoods

#### Needs

- 1.6 million people are to be assisted with food support (787,200 men; 819,400 women)
- 2.8 million people to be assisted with livelihoods inputs (1.4 million men; 1.4 million women)
- 1.7 million people are to be reached with livelihood assets (812,600 men; 845,800 women)

#### Response

- During the reporting period, partners distributed 1,350 **livestock vaccines** in Central Equatoria State. Additionally 1,260 vaccines were released in Pibor and Poachalla.
- Livelihood partners **continued data collection and daily monitoring of market prices**, crop and livestock performance, and supply of fish.
- Since the last situation report, **food assistance teams began food distribution** in POC 2 in Juba.
- Partners together with government counterparts plan to carry out **post crop harvest assessments** in EES, CES and WES under the Livelihoods Investment Activities.
- **Partners are conducting airdrops in: Nyirol county.** Currently there are ongoing air operations in Pading, Mayendit, and Koch. Partners have deployed teams over the next 10 days to Akobo, Gorwai, Turkie, and Pathai.

#### Gaps and constraints

- Boat access from Gambella continued to be suspended as work on the port continued



### Health

#### Needs

- 3.4 million people are to be reached with health assistance (1.7 million men; 1.7 million women).
- **Suspected malaria, acute respiratory infection, acute watery diarrhea, and acute bloody diarrhea remain the highest causes of morbidity among the displaced population.**

#### Response

- **During the first week (29 December-4 January), 50,057 people were reached with medical interventions.** This included 7,729 consultations with displaced people.
- **Emergency response capacity for surgeries and emergency obstetric care** are available in 9 PoC and field locations in the conflict-affected states. The reduced CHF budget for 2015 may delay the expansion of emergency obstetric care.
- A second round **Short Interval Additional Dose (SIAD) polio vaccination** continued in 10 counties in Unity, Upper Nile, and Jonglei. Results of the activity are pending. This intensified approach aims to build immunity quickly.
- **Surveillance:** One suspected measles and one suspected meningitis case were identified in **Duk county.**
- **Partners provided medical services in Akok, Dok, and Melut.**

#### Gaps and constraints

- **Funding constraints** may affect the expansion of emergency obstetric care.
- **Mental health care and psychosocial support** remain major gaps. A workshop was completed in Juba with response activities planned in Juba shortly.
- **Kala-azar response is ongoing.** Additional activities to respond to the ongoing Kala-azar outbreak will begin in 2015, a training workshop with the MoH was completed in Juba. The Ministry of Health will work with partners to identify health facilities in affected counties where resources for diagnosis and treatment can be scaled up.

- **Medical care for HIV/AIDS and TB patients** remains a challenge. Both Mingkaman and Juba UN House PoC have response programmes in place. **Identification of a partner is pending for Bentiu PoC.**



## Mine Action

### Needs

- All 10 states in South Sudan are contaminated with land-mines and/or explosive remnants of war. In order to provide mine action survey, clearance and risk education to vulnerable communities, mine action partners urgently require \$15.7 million to conduct the response activities outlined in the 2015 HRP.

### Response

- **Route verification and clearance continued on the Mayom Junction – Mayom – Abiemnom road to open it for transport of humanitarian aid.** Extensive flooding has made the road impassable in some sections; however engineering works are underway to facilitate operations so clearance can continue when conditions permit.
- Mine Action **survey continued at the Rubkona Airfield** to remove explosive remnants of war (ERW) from the areas that are needed to extend the runway. The additional runway capacity will assist aid operations for all partners in the Bentiu area.
- A team in Juba **removed a high explosive mortar round from a United Nations facility** on 5 January; and in Malakal, an Explosive Ordnance Disposal team continued operations and removed ERW, as well as provided risk education to people in PoC sites.
- A team in Bor continued ERW removal operations during the week; and in Lakes State, mine risk education was provided to United Nations staff to increase awareness of the threats from land-mines and ERW.

### Constraints

- Mine Action teams continue to face challenges working in conflict affected areas due to insecurity and restrictions on movement. Weather constraints are also hampering operations in some areas, but the teams continue to support the wider humanitarian community.



## Nutrition

### Needs

- **1.9 million people are to be reached with nutrition support including : 1.66 million boys and girls under five (844,553 girls; 811,432 boys, and pregnant and lactating women (PLW).**

### Response

- **Three new sites were opened in Pariang county** in the previous few weeks: 2 OTP/TSFP sites in Biu and Nyeel Payams and one SC/OTP/TSFP in Pariang hospital; one OTP/TSFP site in Guit- Unity state. One outreach nutrition service to Nhialdiu Pmeant to be follow-up to a previous mission was not completed due to insecurity.
- **A one day training was conducted for 228 Community Volunteers (118 male and 110 female)** to strengthen community mobilization and case referral in Bor South.
- **SMART surveys were completed in Bor South and Akobo;** results are pending. An IRNA was conducted in Baidit payam, Bor South county, results are pending as well.
- **Nutrition activities resumed in Malakal Teaching Hospital** in Upper Nile State on January 2nd, 2015. In **Panyikang**, emergency response is ongoing despite the logistical challenges since it is accessible by river from Malakal with no functional road.

## HEALTH NEEDS AND RESPONSE KEY FIGURES

	Reporting week (29 Dec-1 January)	Cumulative since January 2015
Number of medical interventions (whole country)	50,057	50,057
Number of people in need (whole country)		6,100,000
Number of people targeted (whole country)		3,400,000
Outpatient Consultations conducted	47,349	47,349
Cholera Cases, all counties	0	0
Cholera Deaths, all locations (CFR = 2.60)	0	0
Hepatitis E Cases	0	0
Hepatitis E Deaths	0	0
Leishmaniasis: Kala Azar / PKDL Cases	*	n/a
Leishmaniasis: Kala Azar / PKDL Deaths	*	n/a
Vaccination, Children (0-15 years) protected against polio through Round 1 SAID in 3 conflict affected areas	58,679	400,026
Rep Health – Women provided ANC services	2,171	2,171
Rep Health – Women with assisted deliveries	488	488
Rep Health – Women with caesarean sections	49	49

Source: Health Cluster, as of 4 January 2015

- **Social mobilization and mass screening was ongoing in Northern Bahr el Ghazal.** In the week under review, a total of 4,189 boys and girls under five (1,969 males, 2,220 females) were screened for acute malnutrition. A proxy GAM rate of 17 was reported (MAM of 12 per cent and SAM of 5 per cent). A total of 3,507 household were reached by the community mobilizers with integrated hygiene and sanitation/health education/ key messages dissemination as needed.

#### Gaps and constraints

- **Funding gaps may affect sustainable nutrition interventions.**
- **Security remains a challenge for access in many counties.** This affects regular access and provision of nutrition intervention activities as well as monitoring and supervision of ongoing activities.
- The ability of partners to submit reports in a regular and timely manner is hampered by the difficulties in communication and transportation.

### Protection (Child Protection)

#### Needs

- **3.3 million people are to be reached with protection assistance (1.5 million men, 1.6 million women).**
- In Awerial county, women leaders have reported an increase in the number of armed men at night, raising protection concerns. In Mingkaman, partners continued to raise concerns regarding the risk of sexual violence and child labor for girls collecting firewood. Partners have observed child labor in Bentiu tea shops and markets and are working to raise awareness.

#### Response

- In Juba, cluster partners **disseminated information on the GBV services** available in PoC I, II and III sites, and **mobilized psycho-social support group activities** with women and girls in PoC II and III. They also conducted a safety and security assessment with displaced people to better understand their perceived threats. **Respondents identified the perceived risks as attacks against women and girls at night inside the PoC site, and harassment/abuse outside the PoC site, notably at checkpoints.**
- A team of Cluster partners was **conducting a rapid response mission to Pillieny, Leer County**, since 12 Dec 2014 and will return on 31 Jan 2015. It has established a safe space in Pillieny to provide psycho-social support and case management to women and girls, conducted community outreach activities to raise awareness about available services, distributed dignity kits, and established a GBV referral pathway. The team is also working to identify areas for capacity-building support for the local health partner.
- Some 350 women and adolescent girls were reached through psycho-social activities at womens centers in Awerial.
- **Cluster partners conducted a rapid assessment in the new PoC site in Malakal** to identify the locations of occupied child friendly spaces and learning spaces. Three potential spaces may be reclaimed/reopened once the new extension to the PoC site is ready. This process will likely take three months.

#### Gaps and constraints

- **Funding for 2015 is insufficient to sustain current and planned programming in the PoC sites, particularly in Juba.**

### WASH

#### Needs

- **4.1 million people are to be reached with WASH assistance (2.1 million men; 1.9 million women).**

#### Response

- Partners maintained emergency WASH service provision in Protection of Civilian sites and other displacement sites. Since the start of the current crisis 55 WASH Cluster partners have reached over 3.57 million conflict affected people –at least half are displaced populations- in over 65 sites with life-saving emergency WASH assistance.

- **Disease prevention and response were ongoing** in Eastern Equatoria and Central Equatoria. Partners were undertaking analysis regarding suspected cholera in Yida. Hepatitis E response in Mingkaman and Bentiu were ongoing.
- In **Bentiu PoC**, water supply was at 13.7 L per person per day and sanitation was at 1 latrine for every 44 people. Latrine construction and de-sludging were ongoing. Pee-poo bags were also distributed and in use in 105 households.
- **Emergency response operations** are were ongoing with 65 partners responding in locations throughout the country, and **six mobile teams** were responding in rural areas across the country, including in Ayod County and Mayom county.

### Gaps and constraints

- Critical funding is needed at the beginning of 2015 to ensure prepositioning of pipeline supplies, especially with the upcoming dry season pre-positioning needed and increased front line services. Physical access will open in locations cut off during the rainy season, scale-up of WASH activities in this critical window of the dry-season will help to mitigate against cholera, other potential water borne disease outbreaks and ensure continuation of services in POC's and settlements in major sites where SPHERE standards are not able to be met.
- Ongoing access into current locations and new locations—particularly around Bentiu and Jonglei state—is vital for continued emergency service provision and EP&R interventions. Continued engagement with the Access Working Group is needed to ensure humanitarian response in hard to reach locations.
- Increased logistical capacity is urgently needed in order to support the ongoing humanitarian response in Bentiu and the other humanitarian operations across the country.
- Additional qualified WASH personnel (within agencies and the cluster coordination team) able to coordinate and implement quality WASH programs in an insecure crisis context are needed on the ground.

### For further information or to provide feedback on this product, please contact:

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