OVERVIEW

With the conflict in Sudan continuing, more than 5.3 million people have been newly displaced including more than one million people forced to flee to neighboring countries. Health conditions in the country remain extremely dire with reports of high malnutrition, disease outbreaks and shortages of medicines, electricity and water. The health care situation is also extremely worrying in the neighbouring countries of Chad, Ethiopia and South Sudan as new arrivals continue across the respective borders to extremely remote areas with limited, or often non-existent medical structures in place. Aid agencies and national health staff are doing all that they can with the limited resources but continue to struggle to keep up with the health needs as the crisis continues.
Highlights

Sudan

- Health situation in White Nile State camps for South Sudanese refugees is extremely dire. There have been 2,688 suspected cases of measles, 79% are children under 5 years old.
- 1,749 deaths reported between 15 May and 12 September of which 1,222 are children under 5 years of age. The majority of deaths were linked to suspected measles and underlying malnutrition.
- Staff from the State Ministry of Health are doing what they can but there are very little resources to ensure quality health care and medicines.
- High risk of severe cholera and malaria in the coming months due to anticipated rains and flooding and shortage of WASH facilities.

South Sudan

- Major causes of death among returnee and refugee arrivals remain measles and malnutrition. alarmingly, approximately 88% of fatalities have occurred among children under 5 years of age. In Renk alone, a measles outbreak has left 59 children dead.
- As of 13 September, Renk reported 651 measles cases and 59 deaths leading to a high case fatality rate of 9.06%. Measles-related deaths account for 39.5% of total deaths in Renk. Ajoung Thok had 436 cases with two deaths, Panakuach reported 10 cases, Maban reported 95 cases, and Pamir reported 511 cases. Makpandu had seven cases, Gorom had ten suspected cases with four Rubella positive, and Parieng reported 68 cases. Enhanced epidemiological and surveillance efforts are crucial for managing these outbreaks.
- The acute malnutrition rate is 31.1% among children under the age of 5, and 63.4% for Pregnant and Lactating Women. This level is much higher than the WHO emergency level (15%) and UNHCR standard (10%).
- Malaria cases are also on the rise accounting for 40% of all medical consultations in Renk.

Chad

- As of 12 September, a total of 418,126 Sudanese refugees have been registered by UNHCR; 93% are women and children, and 22% are children under five years. 176,019 individuals have been so far relocated in seven old camps and four new refugee camps. Screening has shown low immunity of children (60% of zero dose) and high proxy global acute malnutrition rate (> 20%).
- A measles outbreak in Adre has seen 173 cases registered to date.
- As of 9 September, a total of 66,450 medical consultations had been provided. 2,839 wounded refugees and returnees have been registered in the eastern provinces. During August, the average number of casualties admitted was 90 per day, which has dropped to an average of less than 10 per day at the Adré district hospital and the Abeche teaching hospital.
Ethiopia

- On 24 August a cholera outbreak was declared in Metema, where Sudanese, Eritrean and other refugees have been arriving from Sudan. As of 5 September 435 cases including eight deaths were reported.
- The Amhara Regional Health Bureau (RHB) is leading the cholera response, with UNHCR and the government’s Refugee and Returnee Service (RRS) part of the coordination/outbreak control team. The case fatality rate reduced from 2.3% to 1.8%, but is high at double the standard of below 1%.
- WHO, MSF, UNICEF and UNHCR deployed cholera kits to the region by air, due to the security situation.
- The WASH situation is challenging, with limited latrine coverage, open defecation, and congestion at water collection points. UNICEF is strengthening support for the WASH response.
- Security situation remains a challenge, with UNDSS recommendation limiting UN staff presence on ground. Road access and the security situation hindered the drilling of a new water source by authorities. Transportation of essential supplies was also impacted as it had to be airlifted, increasing costs.
- In Kurmuk, there is an increase in reported cases of malaria combined with shortages of antimalaria medication. A total of 210 (104 under 5) cases have been reported between 04 -12 September.

Efforts to scale up response capacity

Sudan (White Nile State)

- In August, WFP started supporting the supplementary aspect of nutrition programming through Plan International (PI). Implementation of IYCF (Infant and Young Child Feeding) practices was limited, however Plan International has started supporting this aspect of nutrition programming.
- UNHCR, WHO, UNICEF, and UNFPA provided medical kits to health centres, with more distributions planned. UNHCR fast-tracked delivery of medicines and medical supplies but gaps remain huge. More medicines are needed to ensure no future shortage is encountered.
- The Ministry of Health has been supported to conduct measles vaccination campaign, with support from UNICEF, MSF, Plan International, Save the Children and UNHCR. A total of 6,395 children were reached in the first round in July, while 45,514 under-5 children (107% of the target) were vaccinated during the second round of the campaign in August that targeted all the camps. During the vaccination campaign mid-upper arm circumference (MUAC) screening was conducted to assess nutritional status. A total of 38,977 were screened. Of these, 32 (0.1%) were referred to SC, 1,485 (3.8%) to Outpatient therapeutic programme (OTP) and 2,699 (6.9%) to Supplementary Feeding Programme (SFP).
- UNHCR partnered with MTI to support health and nutrition programming. Save the Children, NRC and DRC consortium received funding from ECHO through the RRM (Rapid Response Mechanism) to support WASH services delivery, including but not limited to latrine construction, hygiene promotion, home visits, community sensitization and awareness and solid waste management, in Dabat Bosin, Alagaya and Algana’a. Save the Children also supported vaccination in Dabat Bosin and Algana’a.
- MSF continues to support Um Sangour and Alagaya camps (2 of 10 camps) with plans to start supporting Al Kashafa camp in order to increase health and nutrition healthcare coverage.
- Of the 2,688 Measles cases reported in White Nile since March, the majority are from Um Sangour (55%) and Alagaya (44%) camps. Over 79% of cases are children less than 5 years old, and vast majority are not vaccinated for measles (80%) or are only partially vaccinated (13%).
- UNHCR has established mortality surveillance including daily grave count in respective locations following increased reported deaths in the camps since the emergency. An estimated total of 1,749
deaths (of which 1,222 were children under 5) have been reported since May. Crude mortality is estimated at 0.5/10,000/day in all camp locations (standard in emergency context <1/10,000/day), while Under-5 Mortality rate is estimated at 1.5/10,000/day (standard threshold <2/10,000/day). It is worth noting that the daily mortality rate has decreased since the peak in June/July.

South Sudan

- Awareness and vaccination campaigns are being conducted by partners in Bentiu, where the mortality rate attributed to measles increased by 70 per cent between July and August (from 30 to 51 deaths).
- In Maban, the response to the measles outbreak continues, now reaching a cumulative figure of 183 cases.
- Over 8,060 new arrivals have received food assistance via different modalities (hot meal/cash/in-kind) at transit centers in Renk, Abyei, Malakal, Aweil, and Panakuach over the last week.
- In August 2023, a total of 21,499 children under 5 years old (U5) and 3,946 pregnant and lactating women (PLW) among new arrivals have been screened for acute malnutrition by MUAC at both border points and transit sites in three states. Out of this, 6,692 children U5 and 2,502 PLW identified with acute malnutrition, which brings the acute malnutrition rate to 31.1% and 63.4% among children U5 and PLW respectively. This level is much higher than the WHO emergency level (15%) and UNHCR standard (10%).
- To help address high malnutrition rates in Renk County, Vitamin A Supplementation and deworming tablets will be provided to children under 5 who are entering through the Joda border.
- A Nutrition Stabilization Centre with a capacity of eight beds has been opened in Melut Hospital in Upper Nile.

Chad

- A total of 66,450 medical consultations have been carried out since the start of the crisis. Acute respiratory infections, watery diarrhoea and malaria remain the three most frequent pathologies. An increase in cases of skin related conditions has been found. The children examined have benefited from seasonal malaria prophylaxis. In addition, 5,059 mental health cases have been treated so far.
- A total of 44,792 children, aged 6-59 months, have been screened for malnutrition, of which a total of 8,049 cases of moderate acute malnutrition and 4,490 cases of severe acute malnutrition have been treated.
To date, 9,252 pregnant and breastfeeding women have been screened and 924 cases of moderate acute malnutrition have been treated. The preparations for the Standardized Expanded Nutrition Survey, which will cover all camps, to ensure accurate nutrition data collection overtime, are underway.

A total of 516 deliveries have been attended by skilled personnel.

In Ouaddaï, a total of 208 community relays have been trained and are currently working in the Ourang, Arkoum and Méché camps and the site of Adré. They support awareness raising against COVID-19 and on the importance of hygiene, sanitation, and environmental protection.

**Ethiopia**

In Kumer refugee site, Amhara region, a total number of 393 cholera cases have been admitted to the Kumer Cholera Treatment Center (CTC) since the start of the outbreak, of whom 351 have been treated and discharged from the centre.

Supported by medical personnel from Medical Teams International (MTI) and Médecins Sans Frontières Holland (MSF-H), 26 health professionals from the local government (Woreda Health Office) are conducting a daily case management at the CTC, which has a capacity of 64 beds for the cholera response.

Social workers have been conducting home-to-home active case finding and linking them to the CTC, so far identifying 239 suspected cases. One oral rehydration point (ORP) has been established for the purposes of management, screening and linking of patients to the CTC.

Decontamination of the infected areas is ongoing, with 172 shelters in the affected zones disinfected so far.

Health education, risk communication and social mobilization on cholera prevention has been carried out at the Metema transit site and in the Kumer site, including through distribution of key messages on hygiene and other preventive measures. To bolster the response capacity, MTI, in collaboration with the Gondar Health Office, have trained 20 local health care professionals in Genda Wuha.

In the Amhara region, Community Hygiene Promoters (CHPs) have continued conducting house-to-house awareness raising on cholera prevention in collaboration with MTI and MSF-H. RRS has distributed 10,412 bars of soap to 2,848 households in Kumer.

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