Update on Emergency Response Operations in South Sudan

Week Ending 12 August 2012

Highlights

- Humanitarians enhance efforts to improve health, water, sanitation and hygiene conditions in refugee settlements in Upper Nile and Unity in order to reduce high disease, malnutrition and mortality rates
- UNHCR commences airlift of essential relief items for new arrivals in Yida
- Road access to refugee camps in Unity state cut off due to flooding
- Unity state Governor appoints State Refugee Coordinator

Upper Nile State

Security Situation: While the security situation in Maban County remains calm there was a standoff between the Police and refugees at the Yusuf Batil refugee camp market as the police attempted to force a closure of the market on Wednesday 08 August 2012 over taxation issues. The incident was resolved after joint interventions from UNHCR, DRC and Bunj Police. A separate meeting between the refugee leaders and police (camp police and Bunj) will take place in the coming week.

New Arrivals and Border Monitoring: UNHCR Protection and Security teams visited New Guffa border point on 04/08/2012 to observe the security situation at the border, general conditions, potential influx of refugees and to meet with military, local authorities and local communities.

The mission found that the riverbed which is usually dry was filled with water, making it impassable by motor vehicles although it can be used by pedestrians. There are no alternative routes to New Guffa. No substantial movements were observed on that road. A new assessment mission is also planned to El Fuj border point in the coming days.

Refugee – Host Community Relations: In order to address possible tensions over firewood collection in Jamam, UNHCR will in the coming weeks be increasing its advocacy for the use of energy saving stoves. UNHCR is also currently identifying refugee women who will be trained in making and using fuel-efficient stoves.

Health/Nutrition: Over the past two weeks the crude mortality rate in Doro camp has been reduced to 1/10,000/day, down from nearly 3/10,000 per day. The under-five mortality rate is, however, still above emergency thresholds at 3/10,000/day. The main causes of mortality and morbidity are malaria, lower respiratory tract infections, diarrhea and malnutrition. Humanitarian actors continue their approach to decreasing the mortality through continued decentralization of health and nutrition services, establishing 12 Oral Rehydration Points (ORP) with two already running, enhancing community outreaches, undertaking malaria prevention campaigns, distribution of mosquito nets and expanding the moderate acute malnutrition programme.

Health facilities continue to work overtime with 3,000 consultations a week (450 a day) with 45% of consultations being malaria related.
In terms of malnutrition, 500 children under the age of five years with severe acute malnutrition (SAM) have been included in a turn-around programme. In addition, the blanket food distribution continues.

In Yusuf Batil, where consultations are at a high 4,000/week (600 per day), mortality levels are still high and above emergency thresholds. Diarrhea is currently above 30% and cases of acute lower respiratory tract infection and malaria tripled during the past week. The SAM rate is 15%. Some 500 children have been admitted to the SAM turn-around programme.

In Jammam, where the under-five mortality rate is 2.68 / 10,000 / day, mortality rates generally went up during the past week with severe malaria and watery Diarrhea being the main causes of death. Malnutrition levels also remain high and are exacerbated by the high levels of insecurity. The SAM rate is 10%, while global acute malnutrition (GAM) is at 30%. Some 700 children have already been enrolled in the SAM turn-around programme.

Water supply in Jammam has improved to about 10 litres per person per day, resulting from the relocation from Jammam to Gendrassa. On average, 261 cubic meters of water are produced daily. Humanitarian actors are increasing the number of water storage facilities. ICRC has completed the transport of the 14 km pipe expected to be completed by early September and provide uninterrupted water flow from the main water source for refugees in jammam, i.e. the Bantikoe borehole. Humanitarian agencies are also increasing the number of latrines in place and decommissioning latrines in Jammam 1 as refugees move out to Gendrassa.

to date 1,248 latrines have been decommissioned by Oxfam in Jammam one.

**Security and Refugee Protection:** On Wednesday 08 August, the Governor of Unity State informed UNHCR that he had nominated Mr. Manyjur Dau Bol as Sate Coordinator of Refugees in Unity State. Mr. Dau Bol will be the interlocutor for all humanitarian actors on matters related to refugees. Meanwhile, the South Sudan Police will increase its presence in Yida with an additional 45 staff, bringing the total number of police in Yida to 60. While the move is commendable, it still leaves security gaps with one policeman charged with managing 1000 refugees. This is however in keeping with regional police coverage of one policeman to 1000 persons.

**Health/Nutrition:** Current monthly statistics from Yida show a SAM rate of 7.1% and a GAM rate of 25.90%. In the past week, 380 children (117 of them new arrivals) were screened for malnutrition with 46 of them identified as being severely malnourished. Most children with severe acute malnutrition are under the age of 24 months. A third Outpatient Therapeutic Program (OTP) sites has been opened, in addition to the two opened last week bringing the total number of OTPs to four. There are currently two functional stabilisation centres. These interventions help step up nutrition activities and enable earlier detection and referrals of malnutrition cases. In addition, the OTP criteria have been adjusted by health partners now admitting children with a MUAC score of 125 (up from 115). This will enable partners to identify earlier children with high risk of being severely malnourished.

Community outreach programmes are also being enhanced after surveys revealed that there is some bad food practices; for example: Ready-to-Use nutritional supplies for children and adults were being shared by entire households thus compromising the recovery chances of malnourished. Also community outreach programmes will allow detection of sick or malnourished children at an earlier stage of the disease.

**Hygiene Promotion:** As part of the overall hygiene promotion campaign, Solidarites and UNHCR initiated a bucket exchange programme in order to reduce water contamination at the point of use. More than one new jerrycan per family will be distributed in total. Some 3,686 buckets are chlorinated at water points throughout the camp every day. Additionally, more than 30 hygiene promoters are conducting sensitisation sessions at water points, clinics and near the community latrines every day to ensure improvement in hygiene conditions and practices. The availability of water in the camp is increasing with the operation of one new borehole providing 5 cubic liters per hour. The second borehole of 5 is expected to be completed early next week while site preparation for the third one is in progress.
Site Planning: UNHCR is working with the refugee leadership to voluntarily relocate refugees to the western part of the camp. New arrivals have encroached in the North Eastern part of the settlement, increasingly close to the volatile border. This area has no wells and is far from services provided in the settlement. On 5 August, UNHCR met with the Boma chiefs to discuss the upcoming relocation. UNHCR stressed that the relocation should be voluntary. It also recommended that planning be made in order to ensure that vulnerable refugees and single female headed households are not sent to isolated parts of the camp until community structures are in place. The Boma chiefs agreed and stated that no relocations would take place until after the distribution of plastic sheets. UNHCR is also coordinating the relocation with the local Payam authorities.

NFIs Airlift: All humanitarian organizations are heavily dependent on air transport for supply and staff movement as all roads are completely cut off. This continues to pose huge challenges for all humanitarian partners and calls for a strong coordinated response and continuous support from international donors. On 7 August the first two helicopter lift of 1,400 plastic sheets arrived in Yida. This is set continue over the next few days to deliver the total stock of 8,970 plastic to Yida. The airlift will take six days and 12 helicopter rotations to get the entire plastic sheeting stock on the ground. UNHCR is also urgently awaiting the arrival of additional NFI stock, including: 16,152 mosquito nets, 16,083 jerry cans, and 19,230 plastic buckets.

Pariang: part of the student settlement has been affected by heavy rains. UNHCR WASH coordinator has developed a plan to restore the site while affected students were relocated to a guesthouse in the town for the rest of the rainy season.

Access: discussions with the Logisitic Cluster on the upgrade of the Yida landing strip and with UNMISS regarding an helicopter landing site in Nyeel settlement are expected to lead to enhanced access by humanitarian actors in the coming weeks.

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<tr>
<th>Statistics</th>
<th>Upper Nile State: 105,559</th>
<th>Unity State: 61,614</th>
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<tbody>
<tr>
<td>Batil</td>
<td>34,112</td>
<td>Nyeel</td>
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<tr>
<td>Doro</td>
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<td>Jammam</td>
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<td>Gendrassa</td>
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Partners:
ACROSS; ACTED; CARE; Danish Refugee Council (DRC); GOAL; GIZ; IBIS; International Rescue Committee (IRC); International Organization for Migration (IOM); INTERSOS; MEDAIR; MSF-Belgium; MSF-France; Non-Violence Peace Force (NVPF); Norwegian Refugee Council (NRC); OXFAM; Relief International; Samaritan Purse; Save the Children Fund; UNICEF; World Food Programme (WFP); World Relief; World Vision International