

Update on Emergency Response Operations in South Sudan Week Ending 27 October 2012

Highlights

- Plans for possible refugee influx into Upper Nile State shift up a gear
- Yida new arrival decline continues while camp statistics drop due to data clean-up
- Hepatitis E deaths confirmed in Yida, hygiene promotion stepped up

Upper Nile State

Plans for possible refugee influx into Upper Nile State shift up a gear

The arrival this week of 71 refugees (23 households) from Blue Nile State could be for UNHCR and humanitarian actors the precursor of a larger influx of new arrivals fleeing aerial bombardment and lack of food now that the rainy season is almost over.

Rainy weather has significantly decreased in the last two weeks. However, border crossings points remain blocked by high water levels in rivers. Elsewhere, roads through low lying areas are impassable due to standing water. New arrivals cite high water as a key reason for the delay in 'many' people crossing into Upper Nile State. From UNHCR's initial information, new arrivals could reach 15,000-20,000 by the end of the year.

In anticipation of a possible influx UNHCR, local authorities and humanitarian partners have taken the following steps:

- Stepped up border monitoring in possible border entry points in Maban. To date, no significant observations have been made regarding the numbers of new arrivals. Transit sites are envisaged along border crossings for stopovers of between one and three days in instances where sufficient transport may be unavailable, roads become impassable and for possible medical reasons.
- UNHCR is embarking on verification and level 2 registration to clear any backlog of the present Sudanese refugee population in anticipation of several thousand new arrivals in the coming months.
- UNHCR is continuing negotiations with the local authorities on the selection of camp sites. Possibilities have been identified in Melut, Beneshowa (sites pre-identified before the rainy season) and Longichuk. UNHCR is initiating a site planning and detailed water assessment on the various sites, some remain inaccessible due to the current status of the roads but access should re-open shortly. In the meantime, should the arrival of refugees steadily or sharply increase, they will be accommodated in Jammam refugee camp which has since the end of July become decongested following the relocation of refugees to Gendrassa. During the dry season, Jammam will serve as a transit site for new arrivals to recover from the long journey before joining new settlements outside Maban County.
- Mapping of agencies to be involved in the new sites by sector.
- Planning of WASH support required at potential camp sites with the necessary hydro-geological surveys to be conducted and boreholes and emergency latrines set up.
- Preparedness for health-related matters: new arrivals will be vaccinated on entry and in the camps. Immediate referral mechanisms will be set-up for refugees with a serious medical condition. Similarly, drawing on the lessons of previous influxes, levels of malnutrition will be assessed immediately on arrival and special nutrition responses will be put in place.
- Plans for replenishment of NFIs stocks to keep a contingency for 30,000 persons at any given time are compromised by shortage of funds. Active liaison is being made with donors on this issue.
- The mobilization of a fleet of vehicles to transport new arrivals from three possible border entry points is also being planned.
- WFP is planning the pre-positioning of food for the first 15,000 new arrivals should the influx develop. Sufficient quantities of CSB+ and CSB++ have been pre-positioned to meet the nutritional requirements of moderately to severely malnourished refugees.

UNHCR’s contingency planning is based on a possible influx of between 15,000 and 30,000 new arrivals. While field teams are drawing up detailed plans, a contingency planning finalization session will be organized in Juba during the first half of November.

Unity State

Yida new arrival decline continues while camp statistics drop due to data clean-up

A total of 177 individuals (65.9% children and 34.1% adults) were registered, showing a decline in new arrivals compared to last week’s figure of 280 persons. The majority of new arrivals are from counties neighboring the border where bombings are said to have resumed. They cited insecurity as the reason for flight; certain groups also reported food shortages as a result of poor harvests. The total population of registered refugees in Yida as of 21 October is 61,453 individuals (17,946 households), reflecting a decrease of 2,339 individuals following data clean-up. Of these, 53.5% of the population is female. During the week, 66 individuals were removed from the database due to having been registered twice, ostensibly to secure additional food rations and NFIs. Assessment of new sites away from the border continues in Pariang together with the local authorities.

Hepatitis E deaths confirmed, hygiene promotion stepped up

In Yida refugee camp, acute jaundice syndrome (AJS) has been diagnosed in 17 people as of 27 October. Laboratory testing has confirmed Hepatitis E infection in two of six samples that were sent to the KEMRI/CDC labs in Nairobi in early October. Results on seven more recent samples are pending. Two deaths have been reported to date among the AJS cases, the second occurring in an eight year-old child on 18 October.

Measures taken to curtail the spread of the disease include active case finding and increased hygiene promotion in association with on-going mapping of all cases across the camp. UNHCR, health partners and practitioners will continue to enforce community health and hygiene promotion with the help of community health workers.

Two key health messages are presently being reinforced across the camp. These include: a) the importance of hand washing with soap for reducing further Hepatitis E infection amongst the refugees and b) the need for immediate referral to the health center of any person with jaundice in order to ensure that supportive, palliative care of the patient is provided.

Statistics

Upper Nile State: 110,610		Unity State: 65,982	
Batil	37,145	Nyeel	967
Doro	43,483	Pariang	1,223
Jamam	16,205	Yida	63,792
Gendrassa	13,777		

Partners:
ACROSS; ACTED; American Refugee Committee; CARE; Danish Refugee Council (DRC); Food and Agriculture Organization (FAO); GOAL; GIZ; IBIS; International Medical Corps (IMC); International Rescue Committee (IRC); International Organization for Migration (IOM); Lutheran World Federation; INTERSOS; MEDAIR; MSF-Belgium; MSF-France; Non-Violence Peace Force (NVPF); Norwegian Refugee Council (NRC); OXFAM; Relief International; Samaritan’s Purse; Save the Children Fund; Solidarités International; South Sudan Relief and Rehabilitation Commission; UNICEF; World Food Programme (WFP); World Health Organization (WHO); World Relief; World Vision International.