

South Sudan

COVID-19 Update

31 March 2020



UNHCR staff explains the signs and symptoms of COVID-19 to a female community leader in Mahad IDP settlement. © UNHCR/Vi Tran

Key Developments

- As of 30 March 2020, no COVID-19 cases have been confirmed in South Sudan. Notwithstanding, the situation is continually evolving.
- The Government of South Sudan has ordered the closure of all education institutions and health science institutes for 30 days. Events (sports, religious, weddings, funeral rites and political) have been suspended for six weeks effective 20 March. And all non-essential businesses have been asked to close as of 28 March.
- On 24 March, a nationwide curfew, effective for 30 days, has been imposed from 8 p.m. to 6 a.m., with exception of medical emergencies and those with special permits.
- The Government of South Sudan suspended all flights and closed all land border crossing points on 23 March to prevent the spread of COVID-19. Exception is given for cargo planes, emergency and relief flights to land. Additionally, only food trucks and fuel tankers are allowed through the land borders.
- The Government of South Sudan has finalized and disseminated the National COVID-19 Preparedness and Response Plan covering the period from April to September 2020.

COVID-19 Coordination

- UNHCR is participating in the National COVID-19 Task Force and its various technical working groups, headed by the Ministry of Health (MoH) and the World Health Organization (WHO). UNHCR is working to ensure refugees and other persons of concern are included in the national preparedness and response plan. In field locations, sectoral coordination mechanisms have also been established to bring relevant stakeholders together. To the extent possible, teleconferencing capabilities are being used to ensure social distancing.
- Any suspected case is immediately reported to the COVID-19 National Task Force through the Ministry of Health Incident Manager and WHO, who deploys the Rapid Response Team. In support to national preparedness and response efforts, UNHCR and partners developed a COVID-19 contingency plan focused on refugee-hosting areas as well as operations continuity plans to ensure the continued delivery of critical life-saving activities and protection interventions.
- UNHCR is a part of the UN COVID-19 Contingency Planning Working Group. The UN COVID-19 preparedness plans and guidelines builds on the resources and facilities established as part of the ongoing UN Ebola preparedness, which includes UNHCR's persons of concern.
- UNHCR is working closely with its partners to share information, adapt and enhance the delivery of activities to refugees, IDPs and host communities. Through these mechanisms, adequate preparedness, coordinating with local health authorities so that national preparedness plans are adapted to local refugee contexts which includes mass communication and community engagement (including refugee hosting communities).
- UNHCR held its first virtual meeting with refugee response partners in Juba on 31 March 2020, reviewing ongoing preparedness measures, business and operations continuity plans and challenges faced with supply chains and banks.



A refugee housing unit is being set up as an isolation ward at Hakima PHCC in Ajoung Thok refugee camp.
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COVID-19 Preparedness

- Asylum seekers and refugee reception and relocation standard operating procedures were reviewed in line with COVID-19 preparedness to include taking temperatures and checking signs and symptoms of COVI-19 during screening, increased handwashing stations, disinfection of equipment and use of masks by registration staff during registration.
- Identification of isolation/quarantine wards and equipping them with water and latrine facilities is going in IDP sites and refugee camps. For refugee hosting areas, the quick to build Ikea Refugee Housing Units are being dispatched from Juba to increase the number of isolation wards.

- UNHCR and health partners are working with the Ministry of Health to install software in GeneXpert machines to test reported COVID-19 cases in Bunj hospital and Pamir Primary Health Care Centre, located in the two largest refugee hosting areas.
- UNHCR, WFP and partners will distribute two-month food rations to refugees in all locations starting 30 March 2020. In addition, four pieces of soap (500 grams) per person will be distributed at the same time, doubling the ratio of soap available at household level compared to previous distributions. Hand-washing points, social distancing, sanitization of biometric equipment and bottles of sanitizer for UNHCR and partner staff will be put in place during the distribution.
- UNHCR and UNICEF are prepositioning nutrition supplies to refugee locations.
- Mass communication with communities and hygiene messaging on COVID-19 have been ramped up at IDP sites, refugee camps and in their surrounding host communities the past few weeks. Awareness raising is conducted through a variety of means, including through refugee leaders, community outreach, public information systems, and radio. The aim is to minimize misinformation and rumors and ensure concrete and accurate information is available on the disease and actions people can take to minimize risk.



Additional handwashing buckets are being prepared for distribution in Jamjang.

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Protection

- The UNHCR Representation in South Sudan has continued advocating with the Government of South Sudan to guarantee access to territory to all new refugee arrivals and asylum-seekers.
- UNHCR is advocating to ensure avenues for asylum are maintained while ensuring precautionary measures are put in place in reception and transit facilities to mitigate risks of COVID-19.
- Both at national and field levels, UNHCR continues to work closely with the South Sudan Commission for Refugee Affairs to ensure that the enforcement of travel restrictions do not lead to the harassment, arbitrary arrest and/or detention of asylum-seekers and refugees in South Sudan.
- With official border points closed, it has been reported that people are moving between countries through unofficial border points. As a result, persons including spontaneous refugee returnees are neither screened nor quarantined and proceed freely to their areas of destination. The COVID-19 Points of Entry (POE) Technical Working Group is working to use existing Ebola virus disease structures at POE to include COVID-19.
- The Protection cluster and OHCHR presented their paper on *Human Rights and Protection Considerations for Preparedness and Response to COVID-19 in South Sudan* in an online forum. [[LINK](#)]

Challenges

- More preparedness and prevention activities are required to boost WASH interventions and mass messaging. There is a lack of supplies to preposition

- Securing medical supplies and personal protective equipment has proven challenging as several countries have put strict export restrictions with immediate effect on the number of products (gloves, goggles, mouth caps, coveralls) that can be purchased.
- South Sudan heavily depends on the importation of food and other goods from the region. The closure of the borders to people movement has inflated market prices. This will greatly impact the limited coping capacity of the population in an already dire food security environment.
- Supply for humanitarian aid comes by road, thru the Kenya and Uganda border. The Government has ensured that humanitarian aid – including medicines - was excluded from cross-border movement restrictions. Notwithstanding, continued advocacy is continuing to maintain open borders for humanitarian aid and expedite cross-border formalities to ensure continuation of humanitarian operations. The window to preposition relief items for the entire country during the dry season is closing quickly.

Business and Operations Continuity Plan

UNHCR will be staying and delivering for refugees, asylum seekers, refugee returnees, IDPs and those at risk of statelessness during COVID-19.

- UNHCR South Sudan has tested its Business Continuity Plan (BCP) in all locations on 25 March 2020. Following the exercise, lessons learned, gaps and best practices are being reviewed to strengthen the Operations' readiness to shift to alternative modes of work modalities - including teleworking arrangements.
- UNHCR developed its 'worst case scenario' operations continuity plan at national level and in some key locations. With a dynamic situation, plans reflect alternative implementation modalities for non-life saving activities in a context of COVID-19 outbreak and lockdown.

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