

Humanitarian Bulletin

South Sudan | Bi-weekly update

15 July 2015

HIGHLIGHTS

- Cholera cases rise as the cost of clean water skyrockets in Juba.
- The number of civilians seeking shelter in PoC sites has increased by about 64,000 since the end of 2014.
- Violence in Lakes States continues, resulting in dozens of casualties.
- Thousands of people fled Maridi town following violence in June.



People collecting water at Bor Protection of Civilians site. Photo: IOM

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FIGURES

of internally displaced people 1.6 million

of refugees in neighboring countries (post 15 Dec 2013) 607,608

of severely food insecure people 4.6 million

FUNDING

41% of appeal funding received

\$673 million total funding received

\$1.63 billion revised requirements for South Sudan 2015 Humanitarian Response Plan

Update on cholera outbreak

Health partners have managed to reduce the case fatality rate (CFR) of the cholera outbreak declared on 23 June 2015 from 10 to 3.7 per cent by mid-July.

As of 12 July, a total of 917 cholera cases including 34 deaths have been reported in Bor and Juba counties in Jonglei and Central Equatorial states, representing a case fatality rate (CFR) of 3.7 per cent. In Juba County, 833 cases including 33 deaths (CFR 3.96 per cent) have been reported from 75 villages in eight payams. In Bor, 84 cases including one death (CFR 1.19 per cent) were reported from Malou and other areas around Bor.

Children under age 5 account for about 13 per cent of all suspected cholera cases. However, the CFR is higher among young children. Of the 34 deaths, seven (20.6 per cent) were children under age 5. Cholera is particularly dangerous for young children as it causes rapid and severe dehydration due to excessive diarrhoea and vomiting.

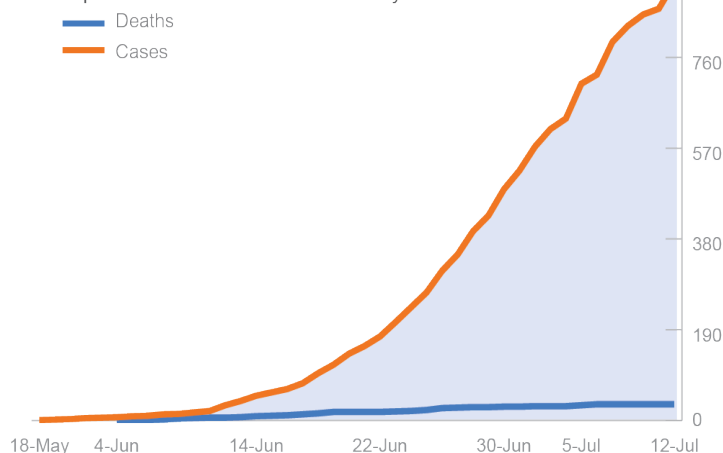
Urgent and life-saving cholera activities have been scaled up by the national cholera task force, which includes all relevant partners in response to the increasing number of cases. Cholera treatment centres and Oral Rehydration Points have been established in Bor and Juba to manage suspected and confirmed cholera cases.

Humanitarian partners are rehabilitating boreholes, supporting chlorination of water delivered by water trucks and increasing water treatment infrastructure for bicycle vendors. Partners are also promoting good hygiene practises such as hand washing and cleaning of water storage facilities, particularly in Protection of Civilians sites.

Partners also conduct life-saving awareness campaigns in schools, focused on explaining cholera, its signs and symptoms, prevention methods and measures to control the disease.

Cumulative cholera cases and deaths

Reported cholera cases as of 12 July 2015



Graphic: OCHA . Sources: Ministry of Health and WHO situation report on cholera

Cost of clean water increases in Juba

An ailing economic situation in South Sudan characterized by increasing prices of essentials such as water has played a key role in the recent cholera outbreak in the capital, Juba, according to a recent partner report.

Countrywide, only 55 per cent of people have access to safe drinking water. Because of increased costs of production, water providers in Juba are producing less and charging more, squeezing people's access to safe water even further.

People living in urban areas, particularly in poorer neighbourhoods, have been hardest hit. Many people can no longer afford to buy enough safe water. Those who still can afford it, now spend twice as much as they did just a few months ago.

Most of Juba's residents rely on private sector suppliers such as water trucks and bicycle vendors, or town boreholes. Although the government caps the price of water, it remains out of reach for many.

For most of the urban poor, the only remaining option is untreated water sources, such as boreholes and the River Nile. The report mentions that some are spending 15 per cent of their income to buy about 30 litres of water for one person's daily use. Others have cut their water consumption to only five litres per person per day, far below international requirements and just a third of the minimum recommended even in emergencies.

Only an estimated 13 per cent of Juba residents can access municipal water supply, mostly through a small piped network, boreholes (half of which are dysfunctional) and a single public water filling station on the river bank.

The public system is complemented by a patchwork of small private water suppliers, which end up delivering relatively expensive and low quality water. There are about 300 registered trucks supplying water throughout the city. However, delivery has decreased by 30 per cent as fuel has become expensive.

At least 11 private filling stations pump water from the Nile which is then distributed by water trucks and bicycle vendors. Water is also produced by bottling water factories. But as fuel costs have increased, operation overheads have also gone up by around 35 per cent. For some bottling companies, production has dropped to just 10 per cent of their total capacity. Others have closed shop altogether. As shelf prices increase, bottled water vendors are selling less than half the quantity they used to.

The limited water people get is used for drinking and cooking, with little left for their personal hygiene. In such conditions, humanitarian partners are deeply concerned that this water shortage could worsen and propel further the spread of disease, such as cholera, if the economic situation doesn't improve.

Read more: <https://www.oxfam.org/sites/www.oxfam.org/files/media-brief-oi-15-07-10-a-city-exposed-juba-south-sudan.pdf>

Cholera cases rise as the cost of clean water skyrockets in Juba.



A bicycle water vendor collects water from the Nile in Juba.

Photo: Dr. Katrice King /Oxfam.

Only an estimated 13 per cent of Juba residents can access municipal water supply.

The number of civilians seeking shelter in PoC sites has increased by about 64,000 since the end of 2014.

PoC sites extended

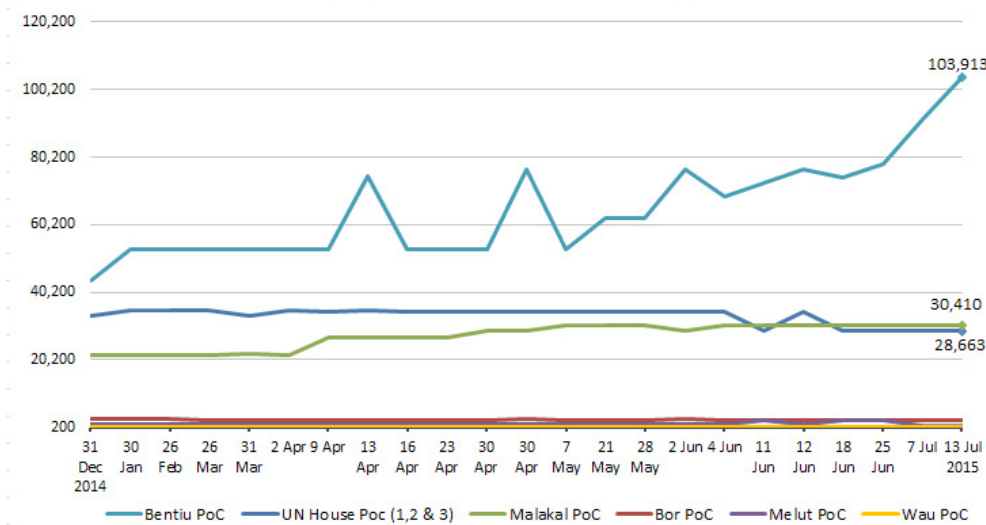
As part of expansion and improvement projects at the Protection of Civilians (PoC) sites in Bentiu and Malakal, relocations of displaced people to improved areas of the sites are ongoing. PoC site development in Bentiu and Malakal will help ensure that the dire situations of the last rainy season are not repeated this year and human dignity is maintained. As of 9 July, more than 43,000 internally displaced people (IDP) had relocated to improved sections of the Bentiu PoC, while nearly 5,700 IDPs had relocated to the Malakal extension site as of 1 July.

The estimated number of civilians seeking safety in the six PoC sites located on UNMISS bases is 166,142, including 103,913 in Bentiu, 28,663 in Juba UN House, 30,410 in Malakal, 2,289 in Bor, 665 in Melut and 202 in Wau. This represents an increase of about 64,000 people since December 2014. Aid agencies are scaling up their operations in response

to the needs of the increasing number of people sheltering in the PoC sites, especially in Bentiu which has seen the sharpest increase.

Unpredictable security conditions continue to increase displacement and severely hamper aid activities, particularly in parts of Greater Upper Nile. Access to Melut County, Upper Nile, remains constrained since fighting in mid-May. In addition, armed activity in the vicinity of the Malakal PoC continues to present a threat to IDPs and humanitarian workers. During fighting on 1 July between armed groups near the Malakal PoC, one civilian was killed and six others were injured.

Displacement trends in PoC sites



Inter-communal violence in Lakes State

The security situation in Lakes State remains tense, as inter-communal clashes continued to flare up over the past weeks.

Violence in Lakes States continues, resulting in dozens of casualties.

Violent clashes erupted in Chueichok area of Cueibet County on 2 July as a result of what were allegedly revenge attacks. By 5 July, an unknown number of people were reportedly killed, including an aid worker who worked for an international NGO. The injured were admitted at the Cueibet County Hospital and health partners in Lakes were preparing to deliver some trauma kits to the hospital once the roads were accessible amid an increase in casualties as result of the inter-communal violence.

On 11-12 July, fighting related to cattle raiding in Yirol East and West counties resulted in about 50 people killed, according to local authorities, and many others wounded.

The security situation in the state capital, Rumbek, has remained tense since the outbreak of armed inter-communal violence in April 2015 leading to the death of dozens of people and several wounded.

South Sudan turns four, amid increasing needs

On 9 July, South Sudan celebrated the fourth anniversary of its independence. The anniversary came amid increasing humanitarian needs resulting from the 19 months of conflict. The war has wracked the lives of hundreds of thousands of families.

The humanitarian community continues to stand in solidarity with the people of South Sudan who continue to bear the brunt of the ongoing war.

Over 1.6 million South Sudanese are internally displaced, more than 600,000 people fled across borders to neighbouring countries. More than 166,000 people sheltering in UNMISS bases fleeing violence. Hundreds of thousands more are cut off from aid and have fled into the bush and swampy areas, far from the frontlines. Over 4.6 million people face severe food insecurity and a quarter a million children are severely malnourished. 862 cholera cases have been reported including 34 deaths in Bor and Juba counties. The Humanitarian response plan is \$673 million funded, leaving gap of nearly a billion dollars.

Despite operating in a challenging environment, the humanitarian community paid tribute to South Sudanese aid workers who are at the forefront of grassroots humanitarian action, providing life-saving assistance, support and compassion within and across crisis-affected communities. In a statement, the Humanitarian Coordinator ad interim, called all parties to the conflict to ensure an enabling environment for the safe and effective delivery of humanitarian assistance and ensure safety of aid workers.



Out of the 166 aid agencies offering life-saving assistance and livelihood support in South Sudan, 64 are national organizations. Source: OCHA

the safe and effective delivery of humanitarian assistance and ensure safety of aid workers.

The humanitarian community continues to stand in solidarity with the people of South Sudan who continue to bear the brunt of the ongoing war and are fully committed to the humanitarian principles of humanity, impartiality, neutrality and independence as we deliver life-saving assistance to the millions of South Sudanese who, instead of enjoying peace in their nation, live in a state of fear, hunger, illness and destitution.

Displaced from Maridi in need of assistance

Thousands of people fled Maridi town following violence in June.

An Initial Rapid Needs Assessment team to Maridi and Ibba counties in Western Equatoria on 2-5 July 2014 observed that Maridi town was deserted. It is estimated that about 22,300 people had fled to the outskirts of Maridi town and about 7,700 people to Ibba centre, Madebe and Manikakara payams in Ibba county, and others to Yambio county.

The conflict in Maridi started on 7 June 2015 when reportedly unknown person threw a grenade to a cattle camp in Maridi and killed seven animals. The cattle keepers retaliated. On 8 June, sporadic shooting started between cattle keepers, soldiers and residents. As a result, 14 people were allegedly killed, 10 injured, 196 houses burnt and several shops looted in Maridi town. Maridi County hospital was looted and vandalized.

During the assessment, the humanitarian team found that the hospital and all schools in the county were closed. The water treatment plant was not working as the water technicians and other civil servants were still displaced out of town. The team noted that displaced people in Maridi and Ibba counties were in need of food, non-food items, shelter, water, health and education services.

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