

## HIGHLIGHTS

- Humanitarian partners have assisted more than 80,000 people in Akobo, Nyirol and Uror counties.
- Emergency food assistance has been distributed to more than 17,300 people in Aburoc. Water remains a predominant concern.
- An attack on Luom, Mayendit County, in May left homes looted, burned and destroyed, and the area's Primary Health Centre reportedly looted.
- Eleven months on, the cholera outbreak continues to spread, with counties most recently affected increasingly distant from the River Nile.

## FIGURES

No. of Internally Displaced People	1.97 million
No. of refugees in neighboring countries	1.83 million
No. of people food insecure (May-July 2017)	5.5 million

## FUNDING

**\$754.9 million**  
funding received in 2017\*

**46%**  
of appeal funding received in 2017

**\$1.6 billion**  
requirements for South Sudan 2017 Humanitarian Response Plan

\*According to the Financial Tracking Service (<https://fts.unocha.org>). Additional pledges have been announced but not yet recorded.



Women and children queue for registration during a Rapid Response Mission to Aburoc. Photo: UNICEF/Hatcher-Moore.

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## Response scaling-up in northern Jonglei

Humanitarian partners have assisted more than 80,000 people in Akobo, Nyirol and Uror counties following fighting in April which displaced more than 100,000 people and forced nearly 60 humanitarian workers to relocate.

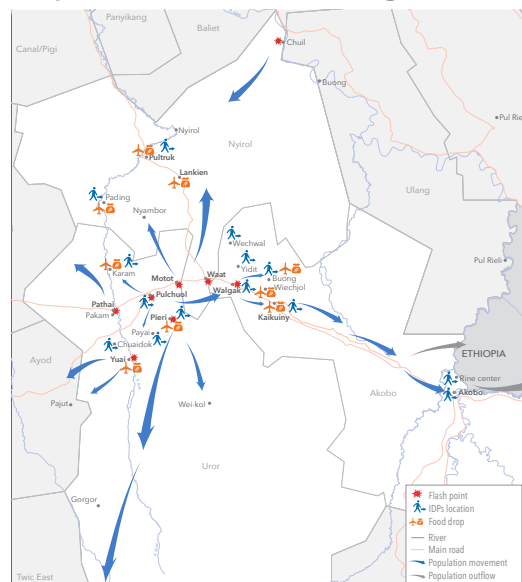
In Kaikuiny in Akobo County and Pieri and Yuai in Uror County, 15-day food rations have been provided to about 82,000 people, including members of host communities and internally displaced persons (IDPs). This week, teams deployed to Karam in Uror County and Wiejchol and Buong in Akobo County to undertake food distributions, and supplies are being sent by river to enable distributions in additional locations in Akobo County, including Bilkey, Nyandit, Dengjok and Gakdong, in the days ahead. Planning is underway for distributions in Pultruk, Pading and Lankien in Nyirol County.

Partners are capitalizing on the food distributions to deliver other life-saving supplies and services. In Buong, water and sanitation activities, emergency vaccinations, treatment for severely and acutely malnourished children and pregnant and lactating women, primary healthcare services, and protection monitoring, are all being provided alongside the food distribution for more than 20,000 people. In Kaikuiny, Wiejchol and Buong, boreholes have been repaired and various water, sanitation and hygiene (WASH) items have been provided, including soap and buckets.

In addition to the thousands of people displaced in northern Jonglei, more than 300 displaced people, mostly women and children, from Uror have arrived at the Protection of Civilians site in Bor. The new arrivals report fleeing for safety after being displaced multiple times since February 2017, when fighting broke out in Yuai and Uror Centre. They were first displaced from Yuai and Uror Centre to surrounding areas such as Motot and Pieri; when government forces advanced to Motot and Pieri, they were displaced to Watt; and when the government attacked Watt in April and May, they were displaced again. Some of the new arrivals in Bor indicated that elderly family members remain displaced in the bushlands of Payai, Pieri and Karam in Uror County, as they could not walk long distances. IDPs from Uror also reported cases of sexual and gender-based violence during the clashes.

People also reportedly continue to flee to Ethiopia, with more than 4,400 South Sudanese refugees arriving in Gambella between 13 April and 15 May. Eighty-five per cent of the

### Displacement in northern Jonglei



Map: OCHA.

new arrivals came from Upper Nile, whilst 14 per cent came from Jonglei (Uror, Akobo and Ayod counties).

*A recent assessment in Duk County found that over 82 per cent of households assessed had poor food consumption scores.*

### Needs rising in Duk

Humanitarians are concerned regarding increasing needs in Duk County, where IDPs have recently arrived in Pajut, Padiet and Poktap from Uror, Ayod, Nyirol and Fangak counties in Jonglei and Bentiu in Unity. There are also reports of community members returning to Duk from areas they were displaced to throughout the course of the conflict, including Mingkaman, Bor and neighbouring countries.

A recent assessment found that over 82 per cent of households assessed had poor food consumption scores, indicative of severe food consumption gaps. The assessment also found negative coping strategies, including emergency selling of livestock, which not only depletes the population's assets, but also reduces access to critical food sources, including meat and milk. Reliance on wild fruits and vegetables in the area is perceived to be above the lean norm standards, and community members reported reliance on certain types of wild vegetables, which are only consumed in emergency times when no other food sources exist. Duk is also experiencing a cholera outbreak. Registration is underway in Payuel and Padiet and food distribution is planned in the coming days.

## Life-saving response in Aburoc ahead of rains

Humanitarian organizations are providing life-saving assistance to thousands of people in Aburoc, Upper Nile, who sought shelter there following the government offensive on the West Bank in April.

*Emergency food assistance has been distributed to more than 17,300 people in Aburoc.*

A Rapid Response Mechanism team that deployed to Aburoc on 9 May distributed emergency food assistance to more than 17,300 people, conducted vaccination campaigns and provided nutrition supplements to children and pregnant and lactating mothers.

Water remains a predominant concern, with cholera confirmed in Aburoc. WASH partners are undertaking hygiene promotion, and implementing sanitation and water treatment activities. Water has been trucked from Dethok, approximately 18 kilometres away. However, in a matter of weeks, water trucking will become impossible as the rains will make the road impassable. Protection partners are engaging with community members to identify the most vulnerable and carrying out general protection activities. Mine action awareness campaigns have been conducted a mine action team surveyed over 30 kilometres of road to identify routes that can be used to transport water and other vital supplies. Health organizations are providing primary healthcare, as well as treating cholera cases.



Women receive food in Aburoc. Photo: UNICEF/Hatcher-Moore

Several members of the Humanitarian Country Team travelled to Aburoc on 17 May, led by the Humanitarian Coordinator, Eugene Owusu, to see the situation first-hand. During the visit, the Humanitarian Coordinator called on the local authorities to immediately return all humanitarian assets which remain in the custody of the SPLA-iO. However, while some assets have subsequently been returned, many remain in the possession of the iO, and advocacy is ongoing for their release.

*Water remains a predominant concern, with cholera confirmed in Aburoc.*

The humanitarian community continues to call on both parties to the conflict to uphold their responsibilities to protect civilians sheltering in and around Aburoc, including to ensure that the area remains demilitarized and does not come under attack.

People reportedly continue to leave Aburoc and surrounding areas towards Sudan.

*An attack on Luom, Mayendit County, in May left homes looted, burned and destroyed, and the area's Primary Health Centre reportedly looted.*

*General food distributions have reached more than 320,000 people in 15 locations in Koch, Mayendit, Leer and Panyijiar counties since February.*

*While the cholera outbreak initially spread to counties along the River Nile, counties most recently affected are increasingly distant from the River.*

## Famine response: Luom attacked

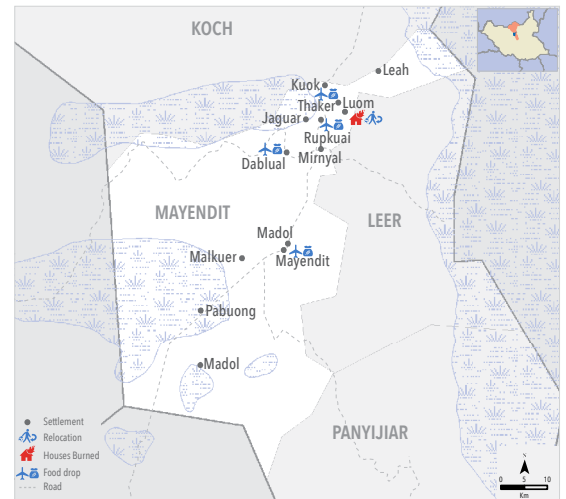
Humanitarians are reviewing their operations in northern Mayendit following an attack on Luom in May which saw homes looted, burned and destroyed, and the area's Primary Health Centre reportedly looted.

The attack took place while an inter-agency humanitarian mission was in the area to provide nutritional supplements, healthcare, protection, survival kits containing vital non-food items, emergency livelihoods support through seeds and fishing kits, and water, sanitation and hygiene services to the most vulnerable people. Most civilians in the area fled to the swamps for safety, while humanitarians were forced to trek for hours by foot to reach a safe location for extraction.

This is the latest in a series of security-related incidents which have disrupted humanitarian response activities since localized famine was declared on 20 February in Leer and Mayendit counties in Unity. Humanitarians have had to be relocated from at least five locations due to insecurity, humanitarian facilities and supplies have been looted in at least two locations, and aid workers have been detained on at least one occasion. Humanitarians are negotiating intensively with all parties to the conflict to ensure that the necessary guarantees are received for the safety and security of aid workers and of civilians in the areas they are serving, and several missions have been delayed to ensure that these conditions are met.

Despite the challenges, humanitarians have scaled-up the multi-sectoral response, increasing their static programming and deploying mobile teams. General food distributions have reached more than 320,000 people in 15 locations in Koch, Mayendit, Leer and Panyijiar counties since February, and rapid response missions have been carried out in at least 17 locations. Across the famine-affected and at-risk counties, humanitarian organizations are delivering vital and life-saving services, including emergency healthcare, vaccinations, nutritional treatments, food, seeds and tools for livelihoods, clean water, and vital non-food items, such as blankets, kitchen sets and mosquito nets. Each of these interventions plays a critical role in preventing famine.

In a related development, the Integrated Food Security Phase Classification (IPC) technical working group has met to analyze data in order to update IPC classifications and projections in the coming weeks.



Map: OCHA.

## Cholera spreads to Kapoeta

More than eleven months since the cholera outbreak in South Sudan was officially declared on 18 June 2016, cases continue to be reported, with a new outbreak confirmed in Kapoeta South, Eastern Equatoria in May, and new alerts in Kapoeta North and Kapoeta East in Eastern Equatoria, Akobo in Jonglei, Rumbek North in Lakes, Tonj East and Tonj North in Warrap.

While the outbreak initially spread to counties along the River Nile, counties most recently affected are increasingly distant from the River. Nine out of the 19 counties affected by the cholera outbreak since June 2016 have reported cholera cases in the past four weeks and are considered to have active transmission of the disease: Ayod, Duk, Fangak and Pigi-Canal in Jonglei, Fashoda in Upper Nile, Awerial, Yirol East and Yirol West in Lakes, and Kapoeta South in Eastern Equatoria.

*The hotline to report suspected cholera cases is 1144.*



Cumulatively, 8,160 cholera cases including 248 deaths (Case Fatality Rate 3.10 per cent) had been reported in 19 counties in South Sudan as at 15 May. Health experts have highlighted that the number of cases recorded could be as little as 10 per cent of the overall number of cholera cases occurring during the outbreak. Children and young adults under 30 years are the most affected, constituting 70 per cent of the cases.

This is the longest, most widespread and most deadly cholera outbreak since South Sudan became independent. In the 2014 outbreak, 6,421 cases were reported, including 167 deaths, over eight months, while in 2015, the cholera outbreak lasted five months and affected 1,818 people, including 47 deaths, in three counties.

Humanitarian partners are responding in all areas with active transmission of cholera, and cholera vaccinations campaigns are ongoing in Bentiu Protection of Civilians site, Mingkaman IDP site and Aburoc, Upper Nile. The response has been challenging, however, due to the locus of many outbreaks in cattle camps, remote and militarized locations, ongoing population displacement, and insecurity in areas affected by the outbreak. With the rainy season approaching, and displacement continuing, it is expected that the disease will continue to spread.

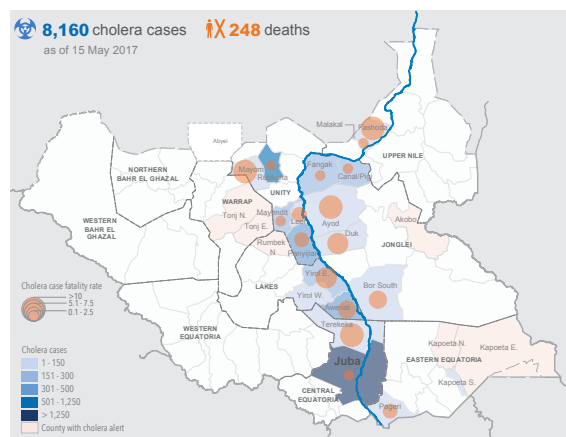
## CERF injects \$15.5m into emergency response

The UN's Central Emergency Response Fund (CERF) has provided \$15.5 million to support top priority humanitarian response activities in areas facing severe food insecurity, including the famine-affected and at-risk counties, as well as those most-affected by recent conflict with high levels of displacement and new and urgent needs.

With this CERF funding, humanitarian partners are aiming to reach an estimated 369,000 people in need in ten counties prioritized for assistance, including: Koch, Leer, Mayendit and Panyijar in southern Unity, which have been classified as facing famine or an elevated risk of famine due to fierce and protracted conflict; Fashoda in Upper Nile, where thousands of people have been displaced, primarily to Aburoc, as a result of conflict on the western bank of the River Nile; and Kajo-Keji, Lainya, Magwi, Torit and Yei counties in the Greater Equatoria region, where clashes and violations against civilians have caused destruction and displacement.

The CERF grant is enabling humanitarian partners to scale up response, particularly through vital funding for procurement, transportation, and distribution of emergency supplies, including inter-agency survival kits, which provide vital supplies to people on the run in remote locations. The funds promote an integrated response to severe food insecurity, including emergency livelihoods support, along with treatment of severe and moderate acute malnutrition, emergency healthcare, increasing availability of clean water and improving hygiene. The inter-cluster prioritization of CERF resources highlighted the centrality of protection, with schools, educational spaces and child-friendly spaces promoted as zones for peace, dignity kits procured for women and girls, and a small pilot funded to support the procurement of fuel efficient stoves in an endeavour to reduce one of the risks of gender-based violence. The funds will also support the transportation of cargo and aid workers to priority response locations.

### Cholera outbreak (2016 - 2017)



Map: OCHA South Sudan / Sources: Health Cluster, May 2017

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OCHA humanitarian bulletins are available at: [www.reliefweb.int](http://www.reliefweb.int)