South Sudan Cholera Outbreak Situation Report

SITUATION IN NUMBERS

138
Suspected cholera cases in Juba

06
Laboratory confirmed cases

05
No. of cumulative health facility deaths

316
No. of volunteers, health workers and community leaders trained on cholera prevention and treatment by UNICEF team since outbreak began

Over 161,000
People who have been fully vaccinated against cholera with 2 doses in IDP camps

USD 10 MILLION
Funding requirements by UNICEF to support the Cholera Response

Highlights

- Juba has witnessed a Cholera outbreak declared by the Ministry of Health on 15th of May. Overall, a cumulative of 1381 cholera cases including 5 deaths have been reported since the onset of the outbreak on 25 April 2014. The majority of the reported cases (81) have been treated in the Juba Teaching Hospital Cholera Treatment Centre.

- The Cholera Preparedness and Response Plan is being implemented, having been activated in both Juba and field offices. UNICEF, supporting the Ministry of Health, along with WHO and NGO partners, has conducted cholera vaccination campaigns in Mingkaman, Bor, Tomping and Juba 3 in an effort to prevent a possible cholera outbreak amongst the displaced communities.

- UNICEF has trained 316 community leaders, volunteers and health workers in Juba since 18 May, with a further ‘rolling training’ carried out to train more than 1,000 teachers, community leaders, health workers by 25 May.

- As immediate response, the National Cholera Task Force is mobilised, with UNICEF leading 2 of the 3 Working Groups (WASH and Social Mobilization and Health Education), while WHO is leading the Case Management and Surveillance.

- UNICEF is coordinating activities with partners, reinforcing Cholera prevention, prepositioning diarrheal disease kits in PoC sites and major population centres, and is implementing a multi-sectorial plan of action.

SITUATION OVERVIEW:

Juba has witnessed a Cholera outbreak declared by the Ministry of Health on 15th of May. Overall, a cumulative of 138 cholera cases including 5 deaths have been reported since the onset of the outbreak on 25 April 2014. The majority of the reported cases 81 have been treated in the Juba Teaching Hospital Cholera Treatment Centre. Prior to the outbreak, UNICEF, supporting the Ministry of Health, along with WHO and NGO partners, conducted cholera vaccination campaigns in Mingkaman, Bor, Tomping and Juba 3 in an effort to prevent a possible cholera outbreak amongst the displaced communities.

1 Report cases as of 19th May
HUMANITARIAN NEEDS AND RESPONSE:

UNICEF has continued to work closely with key line Ministries, WHO and other partners to enhance the support towards the cholera prevention and response. The Ministry of Health re-activated the National Emergency Taskforce to coordinate the response interventions, and the Cholera Preparedness and Response Plan is being activated in both Juba and the field offices. Partners have been assigned responsibilities: surveillance and case management to be led by MoH with support from WHO and UNICEF; Social mobilization and health education by MoH with support from UNICEF and the Aids Resistance Trust (ART), and WASH by Ministry of water/Irrigation with support from UNICEF.

Assessment:

Since the declaration of the outbreak UNICEF Health staff joined missions for gathering data and verifying existing outbreak data, affected groups, times and place and as well as identify high risk areas in Juba to be targeted with cholera activities. As a result of the collaboration among partners, there is on-going active surveillance of cases using existing robust community network of surveillance officers in Juba County. UNICEF also joined rapid assessment mission to Juba Teaching Hospital on May 14, where a number of suspected cholera patients had been admitted. By the time of the assessment the generator was not working, there was only one water point and chlorine was not available. Health staff were not taking basic infection control measures and patients and companions were not sensitized on key preventive measures. There was only one nurse on duty. A rapid WASH assessment was also done completed, and a number of actions were undertaken during the assessment, including sample collection, sensitization to health staff, patients and family members on basic preventive measures, and initiation of rehydration to patients. Following further suspected cholera outbreaks in Upper Nile and Jonglei, UNICEF is also dispatching teams to these sites for further response and assessments, together with partners.

HEALTH AND NUTRITION RESPONSE:

1. Surveillance and case management: UNICEF has also supported the development of guideline for Health Workers on Infant and Young Child Feeding during diarrhea and cholera, for breastfeeding mothers under cholera treatment, provided key messages for general public related to nutrition/IYCF, and provided technical inputs for recommended treatment of severe acute malnutrition cases with cholera.

2. Technical support to Cholera Treatment Centre (CTC): Since 16 May, UNICEF has deployed full time UNICEF doctor and medical staff to the Juba Teaching Hospital CTC to provide onsite technical support and case management advice and guidance to medical staff.

3. Provision of Essential Drugs to CTC: UNICEF has provided one comprehensive Diarrhoeal disease kit to the CTC, along with equipment and consumables to the facility, and this is what has been used to treat the initial caseload.

4. Provision of Tents for CTC: Given the rapid increase in caseload, UNICEF provided three tents – two inside the CTC compound for patients, and the third for triage outside the compound. All of these tents were installed with electricity and lighting to ensure continued care during hours of darkness.

5. Facility Management: UNICEF supported the development of cholera flow-charts and case definition forms to be delivered to all clinics (public and private in Juba peri-urban areas). In the CTC, UNICEF has provided seven drums of fuel to ensure uninterrupted electricity and water supply at the facility.

6. Oral cholera vaccination: UNICEF supported the OCV campaigns, and these have been completed in Tongping, UN House, Mingkaman, Malakal IDP camps and is on-going in Bor. OCV campaign in Bentiu is planned. UNICEF is guaranteeing cold chain capacity for all OCV campaigns at PoC sites.

7. Strategic Pre-positioning: UNICEF has also pre-positioned diarrhoeal disease kits (each weighing 1.4 MT) in Wau, Rumbek, Bentiou, Bor, and Malakal.

1 Reported cases as of 19th May
WASH RESPONSE:

1. **Preparedness & Response for Cholera**: The main focus for the UNICEF WASH programme in the past week has been cholera preparedness in POC sites and cholera response in Juba, primarily in Juba teaching Hospital Cholera Treatment Centre (CTC) as provider of last resort. Emergency WASH Cluster Coordination meeting was also convened on 17 May, and key steps agreed upon for roles and responsibilities amongst partners.

2. **Support Juba Teaching Hospital CTC**: Since the first cholera patients were admitted in the Juba Teaching Hospital, UNICEF supported the Hospital on water quality monitoring, provision of water, and chlorination. UNICEF also assisted on waste water disposal management, provided 1,000 liter of bottled drinking water for ORS solution, and installed a 2,000 liters water tank in the compound to ensure continuous treated water supply availability at the CTC.

3. **Hygiene and Sanitation support to CTC**: UNICEF deployed one international Public Health Supervisor and 19 volunteers in Juba Teaching Hospital since Saturday and continued providing support to cleaning of sanitation facilities, disinfection water chlorination and waste collection at Juba Teaching Hospital CTC. UNICEF also provided on-site instructions to visitors, and health workers on essential hygiene practices at the CTC. UNICEF provided dozens of pairs of gum boots, masks, aprons and protective gear for health and sanitation workers.

4. **Provision of clean drinking water at ‘Protection of Civilian’ (POC) sites**: UNICEF continued to work with partners to provide safe clean water to the displaced populations in the POC sites – the two sites in Juba are receiving adequate water as per SPHERE standards, with UNICEF intensifying testing of water quality across all POC sites, and urban water supplies.

5. **Urban Water Supply in Juba**: UNICEF also is partnering with Juba town Water Corporation and agreed measures for further improving water quality monitoring and water supply treatment in Juba town. UNICEF has also provided chlorine to city council and urban water suppliers.

SOCIAL MOBILIZATION AND COMMUNICATION:

1. **Coordination and Leadership**: Social Mobilization activities have also commenced, and UNICEF is co-leading the Social Mobilization Sub-group of the Cholera National task Force with Ministry of Health.

2. **Package of IEC Cholera Prevention messages**: A comprehensive message pack covering both cholera preventive and control practices was updated, shared with UNICEF state offices, as well as with Health and WASH Cluster partners. IEC material set including posters, banners, stickers and job aids for health workers was completed, dissemination is currently ongoing. Funding permitting, UNICEF will print over 50,000 of each of these items for distribution across the country.

3. **Media Outreach with Cholera Messaging**: Additionally, a multi-language Radio campaign has been initiated on all radio stations of Juba – rolling out to all states on 38 radio channels - and includes hand-washing jingles, infomercial on preventive practices and a radio spot on cholera signs and symptoms for early reporting in 7 languages. Also, radio talk shows, interviews with experts have been rolled out. Plans are currently under-way to roll these out to other parts of the country. Community mobilization activities covering all blocks of Juba county were initiated through public address system supported by AIDS Resistance Trust (ART).

4. **Cholera Training of Community Leaders**: UNICEF supported the Juba City Council in training of 113 Chairmen and Secretaries of 55 Quarter Councils on 18 May. The training covered cholera prevention and control, key messages, community mobilization and discussion on the role of Chairman and Secretaries. WHO supported in media mobilization and in the planning of the training sessions. The training was covered by South Sudan TV and Eye Radio. UNICEF also conducted training for 200 community workers, social mobilizers, teachers and scouts in collaboration with the South Sudan Red Cross. All the trainings were conducted by UNICEF Social Mobilization and Communication team and supported by WASH and Health teams. The teams are ready to roll-out community mobilization initiatives in two blocks of Juba City – with the aim being to reach over 50,000 households by door-to-
door visits by the end of this week. State Ministry of Health also reached all churches with messages and IEC materials in Juba City.

5. UNICEF and WHO shared key messages with WASH and Health Cluster partners across the country. Cholera IEC materials have been posted on the WASH Cluster website: https://sites.google.com/site/washclustersouthsudan/documents Links to the materials have also been widely disseminated via Twitter.

**IMMEDIATE FUNDING REQUIREMENTS:**

UNICEF will require approximately USD10 million to support the cholera prevention and response in Juba and in other parts of the Country.

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<tr>
<th>Budget Line</th>
<th>Amount in US$*</th>
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<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
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<tr>
<td>Programme Implementation, Technical support, monitoring, and coordination. Procurement, prepositioning and distribution of diarrheal disease kits (52), and other essential drugs</td>
<td>2,000,000</td>
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<tr>
<td><strong>WASH</strong></td>
<td></td>
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<tr>
<td>Programme Implementation, Technical support, monitoring, and coordination – hygiene and sanitation. Procurement, prepositioning and distribution of core WASH supplies including chlorine, water purification tablets, WASH protective items, soap, buckets etc</td>
<td>5,000,000</td>
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<td><strong>Social Mobilisation:</strong></td>
<td></td>
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<tr>
<td>Support to production of IEC materials in order to prevent spread of cholera using materials, trainings, media outreach</td>
<td>2,000,000</td>
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<td><strong>Logistics:</strong></td>
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<td>Cross-cutting support for the achievement of results (warehousing, logistics) - for air charter to bring in required diarrhoeal disease kits x 52</td>
<td>1,000,000</td>
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<td><strong>TOTAL</strong></td>
<td></td>
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<td>10,000,000</td>
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*The total includes the Indirect Programme Support Costs (Cost Recovery) of 8% as per UNICEF Executive Board decision

**Who to contact for further information:**

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