

HIGHLIGHTS

- An aid worker was tragically shot and killed in an ambush on a clearly marked NGO vehicle in Eastern Equatoria.
- Outflows of refugees into Uganda continues.
- A new outbreak of measles was confirmed in Gogrial West in late September.
- The cholera outbreak has spread to Unity.

FIGURES

No. of Internally Displaced Persons	1.6 million
No. of refugees in neighboring countries (post 15 Dec 2013)	1 million
No. of food insecure people in July (IPC figures)	4.8 million

FUNDING

\$808 million
funding received in 2016

63%
of appeal funding received in 2016

\$1.29 billion
requirements for South Sudan 2016 Humanitarian Response Plan



Children eat therapeutic nutritional peanut paste at a nutrition site in Aweil. Photo: Medair/Diana Gorter

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Aid worker killed in Eastern Equatoria

An aid worker was tragically shot and killed in an ambush on a clearly marked NGO vehicle in Eastern Equatoria on 14 October, when a team from the NGO ZOA was travelling from Torit to a project site. The deceased was a 41-year-old agricultural officer who had worked for ZOA since 2014.

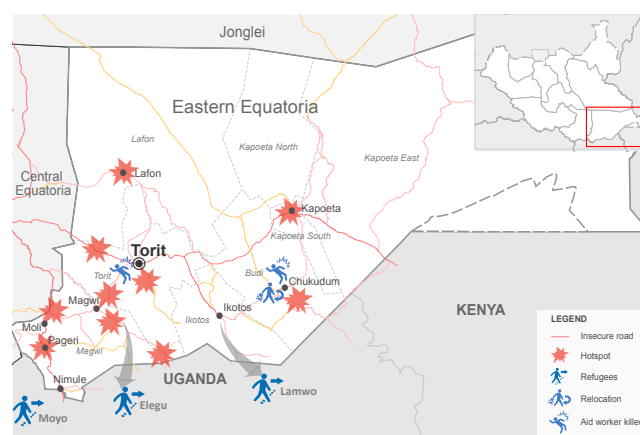
Key roads in Eastern Equatoria have witnessed ambushes against both civilian and humanitarian vehicles in recent weeks. Between 28 September and 2 October, four separate ambushes on humanitarian vehicles were reported on the Torit-Juba, Torit-Magwi and Magwi-Parjok roads. During the incidents, humanitarian vehicles were shot and damaged and staff members were robbed of electronics, money and other personal belongings. Separately, due to active hostilities, 10 aid workers had to be relocated from Budi County in Eastern Equatoria on 11 October.

The Humanitarian Coordinator, Eugene Owusu, said the following when informed of the latest attack: "I am absolutely outraged by the attack against a clearly marked NGO vehicle near Torit on 14 October which resulted in the killing of an aid worker. I have repeatedly said that attacks against aid workers are deplorable, and violate international humanitarian law. Yet, they continue to take place. This has got to stop. Action must be swiftly taken to hold those responsible to account for this attack. At the same time, it is imperative that all efforts be exerted to prevent such attacks in the future. Violence against humanitarians jeopardizes the delivery of vital humanitarian assistance to millions of people in dire need across this country."

Since the conflict began in December 2013, at least 67 aid workers, most of whom are South Sudanese, have been killed. This includes three aid workers killed in the first two weeks of October – the ZOA staff member, a national staff from a humanitarian organization in Akobo who was killed on 8 October in circumstances still under investigation and a national staff from an NGO who was killed when their compound came under fire during fighting in Budi.

In the first nine months of 2016, more than 640 humanitarian access incidents were reported in South Sudan, including 81 in September alone. Out of the 81 incidents, 59 involved violence against humanitarian personnel and assets. This included a substantial increase in assaults, ambushes and armed attacks, with 11 incidents reported in September compared to 5 in August. Armed ambushes and attacks were mainly reported in Eastern Equatoria, Central Equatoria,

Hotspots and displacement in Eastern Equatoria



Source: OCHA

Western Equatoria, Lakes and Western Bahr el Ghazal.

Impediments and restrictions have continued to affect the delivery of humanitarian assistance to people in need in October. In Western Bahr el Ghazal, after occasional access in previous weeks, humanitarians have again been denied passage at checkpoints outside of Wau town in the past two weeks, preventing access to tens of thousands of people in dire need of assistance.

Read more: ZOA press statement-- <http://bit.ly/2dQ62ly>; September Access Snapshot-- <http://bit.ly/2ejzr5i>

Outflow of refugees to Uganda continues

South Sudanese have continued to flee the country in October 2016, with an average of 2,303 South Sudanese arriving in Uganda each day from 1 to 16 October. This represents a decrease from the average of 2,845 arrivals per day in September, but continues the overall trend of departures, particularly from conflict-affected areas.

New arrivals highlight that they have left South Sudan due to the deteriorating security situation and violations against civilians. They report incidents of abductions, arrests and looting in different parts of the country.

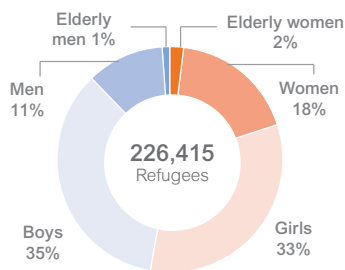
Many refugees report having travelled long distances in order to reach safety in Uganda. Some refugees who arrived at the Oraba entry point informed that they had travelled to Uganda via the Democratic Republic of Congo to avoid security-related risks. Likewise, refugees who arrived at the Elegu Collection Point informed that they had taken a long route from Yei to Juba as the Yei to Kaya road remains unsafe. It has been reported that transport is becoming prohibitively expensive for those who remain in the country.

The humanitarian situation in Yei remains dire for the estimated 100,000 people confined in the town. There are also reports that more people are arriving from the surrounding villages in search of safety and assistance.

From the beginning of July to 16 October, 226,415 South Sudanese arrived to Uganda, representing nearly half of the total number of South Sudanese seeking refuge in Uganda since the conflict began in December 2013 (447,742).

Read more: UNHCR Uganda Operational Update -- <http://bit.ly/2dNj7Jq>

Refugees arrived since July 2016 by age and sex



Source: UNHCR. Graphic: OCHA

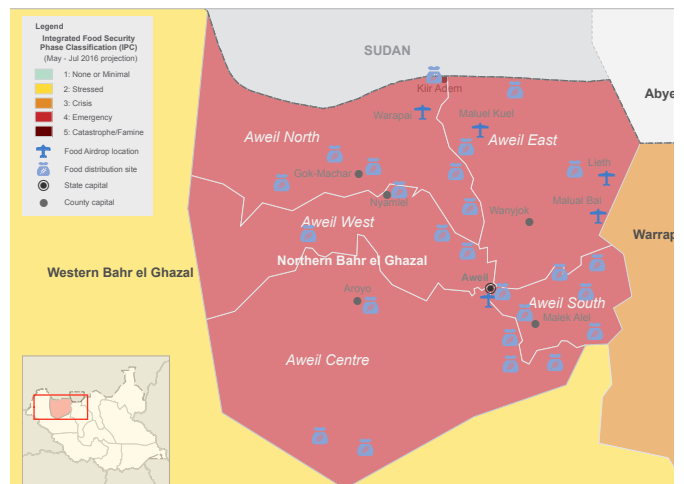
Northern Bahr el Ghazal: scale-up continues

Following a massive scale-up in the humanitarian response, more than 943,000 people in Northern Bahr el Ghazal have received food assistance and tens of thousands have been reached with nutritional support and vital health interventions.

Food drops have now reached more than 828,000 people, while some 115,000 people have received transfers under the Food for Assets (FFA) programme, in compensation for their work building and rehabilitating community-level productive assets. More than 99,800 children under age 5 and 39,700 pregnant and lactating mothers have received nutritional supplements. Partners also recently distributed 1,500 fishing kits to farming communities in six payams, seeds to 3,000 farmers, and other agricultural inputs, to

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Food insecurity and food drop locations



Sources: WFP, IPC. Map: OCHA

Food security in Northern Bahr el-Ghazal has slightly improved with the onset of the green harvest and increased fishing activity.

help boost household food security.

Health, nutrition, and water, sanitation and hygiene (WASH) partners are working to provide an integrated response. The aim is for standardized basic nutrition and health services to be offered at 11 health facilities and 22 nutrition sites in strategic locations across Northern Bahr el Ghazal, where high numbers of malnutrition and malaria cases have been recorded. In addition, nutrition partners are providing refresher trainings of key staff, delivering of nutrition stocks, and deploying experts. To enhance the prevention of diseases and malnutrition, WASH partners are constructing more latrines and washrooms in the health centres and nutrition sites and rehabilitating hand pumps. Messaging on hand washing and the use of safe water are being amplified by community volunteers.



A child screened for malnutrition in Aweil Photo: Medair/D.Gorter

Food security in Northern Bahr el Ghazal has slightly improved with the onset of the green harvest and increased fishing activity, according to the Famine Early Warning Systems Network (FEWSNET). However, the harvest is expected to be below average and high food prices are likely to prevent many from purchasing adequate food to meet their daily needs. In Aweil North and Aweil East, Emergency conditions (Integrated Phase Classification (IPC) Phase 4) persist with a small number of households possibly in Catastrophe (IPC Phase 5). A recent nutritional survey in Aweil North reported a Global Acute Malnutrition rate of 28.1 percent, nearly double the emergency threshold of 15 percent.

“The situation is bad. How am I going to sleep tonight? I didn’t even eat last night,” Regina, a single mother of a 12-month-old daughter living in the area, said to Medair.

Malaria also remains a major concern in Northern Bahr el Ghazal. There have been 212,700 cases and 91 deaths so far in 2016, with food insecure and malnourished people facing heightened susceptibility due to their weakened state.

Threats against aid workers

In recent days in several locations in Northern Bahr el Ghazal, aid workers from the Equatoria region have received threatening letters, some issued allegedly by self-proclaimed youth groups. Local authorities have condemned the threats, called on citizens to refrain from violence and announced an investigation to bring the perpetrators to justice.

Read more: FEWSNET Update -- <http://bit.ly/2dmBnx9>; Medair press release -- <http://bit.ly/2etKUQf>; WFP sitrep -- <http://bit.ly/2e6KxQ3>

New measles outbreak reported in Gogrial West

A new outbreak of measles was confirmed in Gogrial West in Warrap in late September, bringing the number of outbreaks confirmed this year across the country to 13. Since the beginning of 2016, a total of 1,782 suspected measles cases including at least 19 deaths have been reported countrywide.

Most of the suspected cases reported have been in Unity, which accounts for 652, followed by Warrap with 269 and Northern Bahr el Ghazal with 243. Suspected cases were also highest in Unity in 2015. The 13 outbreaks have been confirmed in: Juba in Central Equatoria; Twic and Gogrial West in Warrap; Mayom in Unity; Aweil West, North and Centre in Northern Bahr el Ghazal; Malakal in Upper Nile; Yirol West and West in Lakes; and in the disputed Abyei Area.

Health partners are undertaking both prevention and response activities in an attempt to stem the outbreaks. A reactive measles campaign in the Abyei Area began on 10 October has reached over 21,500 children and plans are underway for a similar response in Go-

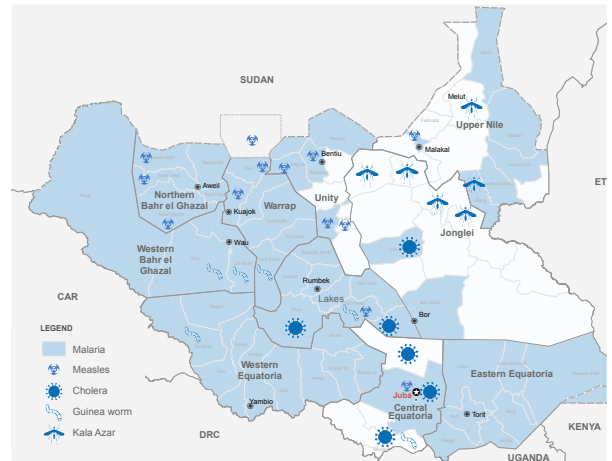
1,782 suspected measles cases have been reported in South Sudan in 2016.

Routine vaccination coverage remains low, including due to insecurity, destruction and looting of health facilities.

grial West. A similar campaign was conducted from January to April in response to the outbreaks in War-rap, Unity, Northern Bahr el Ghazal, Central Equatoria, Upper Nile, Lakes and Western Bahr el Ghazal, reaching about 369,000 children aged 6 months to 15 years. However, routine vaccination coverage remains low, including due to insecurity, destruction and looting of health facilities, which often results in damage to cold chain facilities that are vital for the storage of vaccinations.

Read more: *IOM press release* -- <http://bit.ly/2dzC4Bs>

Disease outbreaks to date in 2016



Source: WHO. Map:OCHA

South Sudan is one of the four remaining countries affected by Guinea worm.

Re-emergence of suspected Guinea worm cases

In a disappointing set-back following extensive efforts to eradicate Guinea worm disease in South Sudan, 15 suspected cases were reported in September and October in Kajo-Keji (1), Jur river (1), Tambura (1) Tonj South (6), Yirol West (4) and Wau (2), bringing to 55 the number of suspected cases reported this year.

South Sudan has made significant progress towards eliminating the disease in recent years, reducing cases from over 20,000 in 2006 to 70 in 2014 and just six in 2015. Efforts to eliminate Guinea worm have included filtering drinking water, treating drinking water with Abate chemical, isolating patients with the disease, health education and provision of safe drinking water. Incentives are also offered for those infected to come forward through a cash-reward programme that gives 5,000 South Sudanese Pounds to any individual who reports a case of Guinea worm at a health facility.

Guinea worm disease is caused by drinking water containing water fleas (Cyclops species) that have ingested *Dracunculus* larvae. Once ingested, the Guinea worm burrows through the flesh to the surface and can be an extremely painful and debilitating disease.

South Sudan is one of the four remaining countries affected by Guinea worm, together with Chad, Ethiopia and Mali.

Cholera reported in Unity as outbreak spreads

The 2016 cholera outbreak is now affecting eight counties countrywide, with 2,539 cases and 38 deaths (Case Fatality Rate (CFR) 1.5 per cent) reported as of 16 October, as compared to 1,818 cases and 47 deaths (CFR 2.58 per cent) reported by the same time last year.

The latest areas to confirm cases are Leer Town and Rubkona in Unity. Other areas with confirmed cholera cases include Juba and Terekeka in Central Equatoria, Pageri in Eastern Equatoria, Duk and Fangak in Jonglei, and Awerial in Lakes.

Juba remains worst affected, accounting for 1,911 of the reported cholera cases and 14 deaths. Awerial has reported 328 cases and 3 deaths, Fangak 167 cases and 4 deaths, Duk 77 cases and 8 deaths, Pageri 29 cases and 1 death, Terekeka 22 cases and 8 deaths, Rubkona 3 cases and Leer 2 cases. Partners are concerned about the risk of further spread of the disease in Fangak due to severe floods which have affected 30,000 people, and in Leer and surrounding areas due to ongoing insecurity which continues to displace people and restrict the presence of aid workers in the area.

The hotline to report suspected cholera cases is 1144.



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OCHA humanitarian bulletins are available at: www.reliefweb.int