

HIGHLIGHTS

- United Nations Secretary General appoints Alain Noudéhou as Humanitarian Coordinator for South Sudan.
- A mid-year review of the 2017 Humanitarian Response Plan (HRP) finds increasing humanitarian needs in South Sudan.
- Humanitarian coordinator a.i. calls for immediate end to attacks on civilians and aid workers in South Sudan.
- South Sudan's cholera outbreak, known for being the longest and deadliest in the nation's history, is now declining.
- Fresh fighting between government and opposition forces is increasing in the Greater Equatoria region.

FIGURES

No. of Internally Displaced People	1.87 million
No. of refugees in neighboring countries	2.0 million
No. of people severely food insecure (June-July 2017)	6 million

FUNDING

\$1.1 billion
funding received in 2017*

65.7%
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.



Aid workers celebrate World Humanitarian Day 2017.
Photo: OCHA/Guioamar Pau Sole

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Alain Noudéhou appointed South Sudan Humanitarian Coordinator

United Nations Secretary-General António Guterres on 28 August announced the appointment of Alain Noudéhou of Benin as his Deputy Special Representative in the United Nations Mission in South Sudan (UNMISS). He will also serve as United Nations Resident Coordinator, Humanitarian Coordinator and Resident Representative of the United Nations Development Programme (UNDP).

Mr. Noudéhou succeeds Eugene Owusu of Ghana, who completed his assignment in July 2017. The Secretary-General is grateful for Mr. Owusu's dedicated service with the United Nations in South Sudan.

Currently the Chief of Staff and Director of the Executive Office of UNDP in New York, Mr. Noudéhou brings to his new position extensive experience in international development and humanitarian affairs (since 2016).

He previously served as United Nations Resident Coordinator and UNDP Resident Representative in China (2014-2016) and United Nations Resident Coordinator, Humanitarian Coordinator and UNDP Resident Representative in Zimbabwe (2010-2014). Appointed UNDP Country Director in the United Republic of Tanzania in 2007, he was UNDP Deputy Resident Representative in Rwanda in 2004.



Alain Noudéhou

South Sudan's humanitarian needs increase

A mid-year review of the 2017 Humanitarian Response Plan (HRP) conducted in July, has found that in the first half of 2017, humanitarian needs in South Sudan continued to escalate mainly due to conflict, displacement and food insecurity. People in need increased from 7.5 million to 7.6 million while those targeted increased from 5.8 million to 6.2 million people. Given the global strain on humanitarian financing, the Humanitarian Country Team (HCT) agreed to keep the appeal at US \$1.6 billion.

As of end of June 2017, the number of people displaced rose to nearly 4 million—including 1.9 million internally displaced and more than 2 million refugees—following large-scale government offensives in Jonglei and Upper Nile, and insecurity in the Equatorias.

Localized famine was declared in Leer and Mayendit counties in Unity on 20 February 2017 and, although the famine was halted by a massive multi-sectoral humanitarian response, food insecurity reached unprecedented levels during the year, with some

6 million people severely food insecure. The operating environment in South Sudan remained challenging. Seventeen (17) aid workers were killed between January and August 2017. Yet, despite the challenges, aid agencies were able to reach more than 4.4 million people in dire need across the country by the end of July 2017, through a combination of static presence, mobile response modalities and the delivery of survival kits.

Read more: *HRP Mid-year Review 2017* -- <http://bit.ly/2wIGZuw>

Humanitarian Coordinator a.i demands end to attacks against civilians, aid workers

On the eve of World Humanitarian Day, the Humanitarian Coordinator ad interim (a.i.) for South Sudan, Serge Tissot, called for an immediate end to attacks against civilians and aid workers as conflict continues in South Sudan. "We continue to witness increasing, deliberate and unprovoked attacks against civilians and aid workers in South Sudan. This should not be accepted as the norm," said Mr. Tissot. "We urge the public to make an overarching call to action: Civilians and Aid workers are #NotATarget."

South Sudan continues to be one of the most dangerous places for aid workers. Since the conflict began in December 2013, at least 82 aid workers have been killed, including 17 in 2017 - most of whom are South Sudanese. Even more aid workers continue to be missing or are in detention. Aid workers are routinely subjected to harassment and intimidation, while there is impunity for the perpetrators.

Humanitarian efforts continue to be met with increasing constraints on access. Nearly 630 humanitarian access incidents have been reported since January, including attacks on humanitarian compounds, and looting of aid supplies and convoys across the country. Since January, 27 security-related incidents have forced the relocation of some 300 aid workers. These incidents signify a worsening operating environment for humanitarians in South Sudan.

"When aid workers are endangered or under attack, millions of vulnerable people, who need food, health services, access to clean water, nutrition and education services, are deprived of the much-needed help," said Mr. Tissot.

Read more: *HC a.i. Statement* -- <http://bit.ly/2fS6Glq>

Cholera outbreak on the decline, but persists as a major threat to public health

Declared on 18 June 2016, South Sudan's cholera outbreak, known for being the longest and deadliest in the nation's history, is now on a decline, according to health partners.

The decline is attributable to the current multisectoral response that entails the complementary use of oral cholera vaccines alongside traditional interventions for cholera control in transmission hotspots.

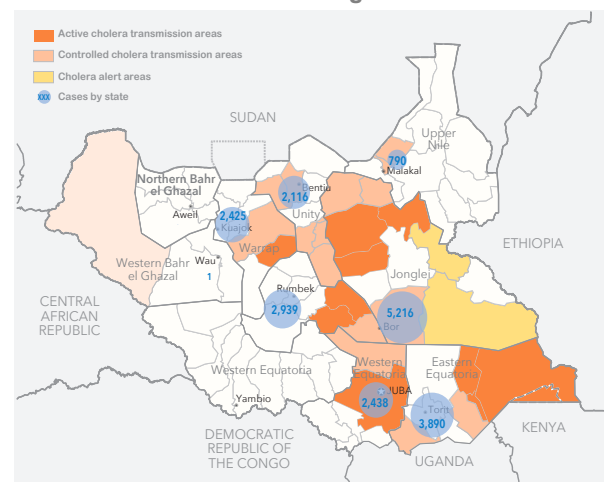
According to latest health data analysis, cholera transmission has been on the decline countrywide. However, during July and August, at least six counties including Budi, Juba, Kapoeta East, Kapoeta South, Mayom, and Nyirol, have registered cholera transmission.

Juba and Budi counties ac-

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Cholera cases June 2016 - August 2017



Map: OCHA. Sources: WHO

Cumulatively, there are, 19,862 cholera cases including at least 355 deaths reported in South Sudan between 18 June 2016 and 7 August 2017. The Case Fatality Rate (CFR) is 1.8 per cent.

count for the majority of the cholera cases reported currently. The ongoing outbreak in Budi started on 28 July 2017 with the initial transmission occurring among gold-miners in Ngauro. Budi County has reported a cumulative of at least 159 cases including eight deaths since 28 July 2017. Cordaid and the CHD have established two Cholera Treatment Units (CTUs) (Ngauro and Nagishot) and one Oral Rehydration Point (ORP) (Vaka) to facilitate case management.

Cumulatively, 19,862 cholera cases including at least 355 deaths were reported in South Sudan between 18 June 2016 and 7 August 2017, affecting 26 counties, most of which are along the River Nile. The Case Fatality Rate (CFR) is 1.8 per cent.

New cases continue to be reported, most recently in Bor, Torit, Duk, Ayod, Fashoda, Kapoeta East, Kapoeta North, Kapoeta South, Nyirol, Uror, Renk, Tonj East, Yirol East and Yirol West counties, and the UN House Protection of Civilians (PoC) site in Juba. Women and girls constitute 53 per cent of the cases.

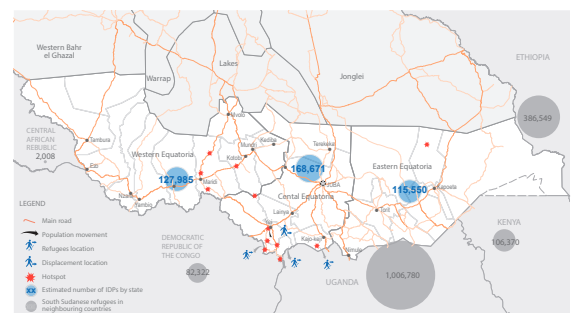
Since the beginning of 2017, health partners have provided supplies to Cholera Treatment Centers (CTCs), CTUs and ORPs in affected communities. At least 30 Diarrheal disease kits (DKK), 100 cholera beds have been distributed to ORPs, CTUs and CTCs for effective treatment of suspected cholera cases.

Renewed fighting in Greater Equatoria region

Fresh fighting between government and opposition forces has increased in the Greater Equatoria region.

Clashes have been reported in several areas including Bindu, Kaya, Kimba, Bazi and Yei town (Yei County), Jalei (Kajo-Keji County), Riwoto in Kapoeta North, Eastern Equatoria, Lukudu (Mundri West County), Gulumu (Morobo County), Sika-Rumbek, Line-Zira and Nambia (Maridi County). Thousands of people have been forced to flee their homes.

Areas of reported fighting in August



Map: OCHA. Sources: UNHCR

Dozens of people were killed in Kaya including Christopher Allen, an American freelance journalist.

In Central Equatoria, fierce fighting was reported in several areas including Bindu, Kaya, Kimba and Bazi in Yei County on 26 August. Dozens of people were killed in Kaya including Christopher Allen, an American freelance journalist. Aid agencies say most of the locations affected by the fighting were largely deserted as civilians fled to Uganda, where more than 1 million South Sudanese are seeking refuge. Similar fighting was reported along Yei-Maridi road on 28 August.

Partners also reported increased military deployment in Yei, as fighting was said to be ongoing in areas on the outskirts of the town. Due to this fighting, partners suspended inter-agency response and assessment missions planned for Goli and Kupera in late August.

In Western Equatoria, fighting also erupted between armed cattle keepers and youth groups in Sika-Rumbek, Line-Zira and Nambia in Maridi Country. As a result, nearly 9,000 people were displaced from Mahad and were reportedly sheltering at Maridi Teachers Training Institute and Bambu church. Partners operating in Mundri counties continued to experience access restrictions by state and security authorities. As a result, humanitarian partners are unable to obtain adequate information on the needs in areas affected by the fighting.

In Eastern Equatoria, NGO staff members were relocated from Riwoto in Kapoeta North County to Kapoeta South due to security concerns at the beginning of August. This followed military movements of both government and opposition forces. As a result, a cholera vaccination campaign was temporarily suspended in Kapoeta North.

Following an initial rapid needs assessment conducted by humanitarian partners in Kokori, Bogori and Yeri villages of Mvolo County, more than 21 metric tons of food items

were delivered Mvolo Centre in mid-August.

Nutrition, water, sanitation and hygiene interventions are ongoing alongside the general food distribution in affected areas in Mvolo and Maridi counties. During the needs assessment early August, partners reported that food stocks in the area had been depleted and many people were surviving on wild foods.

Upper Nile: partners scale-up response in Aburoc

Humanitarian partners have scaled up the provision of humanitarian assistance in and around Aburoc, Upper Nile to meet the urgent needs of displaced people following clashes in April. Distribution of food to internally displaced people (IDPs) in Aburoc, Malakal Protection of Civilian (PoC) site and Malakal town has been completed. More than 15,000 people in Aburoc, 24,400 in Malakal PoC site and about 4,000 displaced in Malakal town received one-month food rations.



Youth in Malakal PoC site. Photo: OCHA/Frank Nyakairu.

In response to the malaria outbreak, health partners in Aburoc and Malakal PoC site promoted the use of nets and sprayed larvicides to stem the breeding of mosquitoes.

In Fashoda County, more than 3,600 households (IDPs and host communities) have received unconditional cash grants and cash-for-work opportunities. Training in fish processing and preservation, targeting about 300 households, was also completed in Aburoc to enable people to increase fish catches and preserve them better.

Households also received vegetable seeds and training in vegetable production including pest and disease control techniques. Nearly 1,100 households have also benefited from a restocking initiative for goats, sheep, and chicken in Aburoc – at least 20 donkey carts and 15 ploughs were also provided to the displaced. These efforts are ongoing even as fighting was reported in Fashoda between government and opposition forces at Aduado, about 12 kilometres south of Aburoc on 21 August.

In response to the malaria outbreak, health partners in Aburoc and Malakal PoC site promoted the use of nets - while spraying larvicides to stem the breeding of mosquitoes. Mobile clinic services are ongoing to serve population on the western bank of the River Nile in Lul, Kodok and Wau Shilluk. Partners plan to conduct measles vaccination campaigns, deworming and Vitamin A distribution in Maban, Fashoda, Renk, Malakal and Melut.

Despite the response, humanitarian operations in Aburoc and other parts of Upper Nile continue to be impeded by ongoing insecurity, harassment of aid workers and bureaucratic impediments.

In Renk, the Relief and Rehabilitation Commission has issued new rules and regulations to govern humanitarian work - including interference in procurement and recruitment decision-making by aid agencies. The national government in Juba distanced itself from the new regulations.

Nearly 5,000 IDPs departed Malakal PoC site

Partners reported that approximately 5,000 IDPs left the Malakal PoC site, bringing the population there to about 24,400 people as of 16 August. At the same time, the UN refugee agency (UNHCR) in Sudan has reported that at least 4,338 South Sudanese refugees have arrived in Sudan from 1 to 16 August.

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