



**Weekly Bulletin**  
**Humanitarian Action in Southern Sudan**  
**Week 47, 23 – 30 November 2008**

**SUMMARY/HIGHLIGHTS**

- ✚ Makpandu site (Western Equatoria State) considered for relocation of 5,000 refugees
- ✚ LRA rebel leader Joseph Kony did not sign the peace agreement again on 29 November
- ✚ Cases of acute watery diarrhea increasing in NBeG after floods
- ✚ USG Humanitarian Affairs and ERC John Holmes visited Juba 27 – 28 November

**I. FOCUS ON SECURITY AND HUMANITARIAN ACCESS**

- The Lord's Resistance Army (LRA) rebel leader Joseph Kony did not sign the final peace agreement as expected on 29 November. The instability caused by the rebels in eastern DR Congo may persist, thereby causing increased influx of refugees into Southern Sudan's Western Equatoria State (WES).

**II. CURRENT ISSUES**

**Latest Update on DR Congo Refugees in Western Equatorial State (WES)**

UNHCR verification of people displaced from DR Congo by the LRA rebels confirmed a total of 4,507 refugees being hosted by communities in seven areas as at 27 November. The distribution of the refugees is as shown in the table below.

SITE	Gangura	James Diko	Madebe	Sakure	Sangua	Ukuo	Yambio
TOTAL BY SITE	<b>2,198</b>	<b>103</b>	<b>410</b>	<b>875</b>	<b>188</b>	<b>389</b>	<b>344</b>
<b>GRAND TOTAL</b>	<b><u>4,507</u></b>						

Out of the total number of refugees, 1,249 are women aged between 13 – 49 years. In addition, over 2,000 Sudanese have also been displaced from the border areas along with the refugees. The LRA rebels are attacking from their Garamba Forest base in eastern DR Congo. Southern Sudan areas bordering that area are being affected by the renewed attacks.

UNHCR, WFP, World Vision, MSF Spain and MSF Belgium are helping local authorities to respond to the situation. Humanitarian assistance in the form of food, non-food items and medical treatment is being distributed to the affected population.

On 27 November, an inter-agency assessment mission visited two possible sites – Makpandu and Kiss, to determine possibility of refugees being relocated there. The mission parties agreed on Makpandu and approximately 5,000 refugees would be moved. In light of this new development, UNHCR has requested for the deployment of a site planner to support the emergency team on the ground in making the site ready for occupation by the refugees.

Among other issues, critical facilities for healthcare, water supply and environmental sanitation need to be attended to before the refugees are relocated.

Makpandu is approximately 55 km from the DR Congo border and 41 km away from the Western Equatoria State capital, Yambio. It lies along an accessible road stretch linking Yambio to Ibba and Maridi. It is home to 2,750 local population.

### **III. POPULATION MOVEMENTS AND RETURNS**

*See section II. Current Issues above.*

### **IV. SITUATION, NEEDS AND RESPONSE BY SECTOR**

#### **Coordination and Common Services (from UNOCHA, UNJLC)**

- OCHA EP&R is supporting the Resident Coordinator's Support Office (UNRSCO) in Aweil to coordinate humanitarian response operations towards the people affected by floods between July and early November.
- On 27 November, UNJLC undertook a one-day mission to Yambio to inspect the condition of the airstrip following temporary repairs by Civicon. The repairs were commissioned by the State authorities after the airstrip was declared 'No-Go' in October by UNHAS. Mission outcomes concluded that the 900m airstrip is in an acceptable condition although further clearance on either side of the runway is still required. There is a considerable amount of dust created on landing and take-off as a result of the 'settling' of the runway surface. However, Caravans are landing on the airstrip. UNHAS will inspect the repairs and decide whether to put the airstrip back on its regular flight schedule. WFP and the ministry of transport are following up on ways to find a long-term solution. For questions about logistics and other common services please email UNJLC at [unjlc.juba@unjlc.org](mailto:unjlc.juba@unjlc.org).

*(Humanitarian Actors in this Sector are: OCHA, RCO, UNICEF, WFP, SSRRC, UNDSS, UNMIS, UNJLC, IOM)*

#### **Health (from UNOCHA)**

- The Northern Bahr el Ghazal State (NBeG) ministry of health is strengthening acute flaccid paralysis (AFP) surveillance. In addition, a series of polio campaigns were conducted from 24 to 26 November. The next campaign is scheduled for January 2009. This follows reports of confirmed cases of polio in Central Equatoria State and some other places in Southern Sudan after five years.
- Acute watery diarrhoea is continuing to affect the people in NBeG. In week 47, a total of 348 cases were reported with four deaths. In Pariak (55 cases, 2 deaths), Peth (70 cases), Akeum (67 cases), Aweil town (99 cases hospitalised from Gueng), Majakawar (20 cases, 1 death), Malualkon (13cases, 1 death) and Malualbai (14 cases). These areas are covered by MSF-France (first 4 areas) and IRC (last 3 areas). MSF –France sent a team in Gueng to open a centre for oral rehydration (ORS Centre).
- During the reporting week, Central, Eastern Equatoria and Jonglei States successfully conducted polio national immunization days (NIDs) targeting 616,000 children under five. Vaccinations were carried out house to house and were implemented by SMoHs supported by UNICEF/WHO and partners. The 5th round of NIDs targeting 323,723 children under 5 was implemented in Upper Nile State.
- Central Equatoria State continued to conduct weekly surveillance meetings and activities in the wake of reported cases of wild polio virus noted (3 cases in CES).

*(Humanitarian Actors in this Sector are: Goval, Ministry of Health, MSF-Switzerland, SSRRC, and UNICEF, WHO as sector lead)*

#### **Disarmament, Demobilization and Reintegration (from UNICEF)**

- NCDA operating in Nasir County reported the presence of Children Associated with Armed Forces (CAAF) in Nasir County and Yomding and Ulang towns. Six children carrying guns

and wearing SPLA uniforms were also seen by the UNICEF child protection officer. UNICEF will follow up for future demobilization and reintegration

*(Humanitarian Actors in this Sector are: ...)*

#### **Water and Sanitation (from UNICEF, UNOCHA)**

- IOM received 5000 water purification filters to be distributed to the areas affected by acute watery diarrhea (AWD) in Northern Bahr el Ghazal. NGOs working in the areas have been requested to collect them for distribution. During the week, IOM also repaired nine boreholes and is targeting six more. Tearfund has made 500 toilet slabs for Aweil east
- UNICEF, in partnership with MEDAIR, officially handed over to local authorities the emergency water treatment system in Torit and Parjok constructed in response to the cholera epidemic. Each of the systems has a capacity of 40,000 litres per day serving 2,000 people.
- UNICEF supported the Directorate of Rural Water Development in Jongolei State to complete two toilet blocks each of six compartments at Bor Complex Primary School. This is expected to serve an estimated 3,981 students (2,692 boys, 1,289 girls).
- 20 complete Imk2 hand pumps, including the G.I pipes and connecting rods have been issued to JB Drilling for the construction of 20 new safe water sources in Warrap State. These will increase access to safe water for 10,000 additional people.

*(Humanitarian Actors in this Sector are: ICRC, Save the Children US, MSF Switzerland, GOAL, Medair, Oxfam GB & Intermon, Tearfund, Mercy Corps, two local partners, Ministry of Health and UNICEF as sector lead)*

#### **Mine Action (from UNICEF)**

- 500 children (160 boys, 176 girls and 164 elders) benefited from mine risk education carried out in Malakal in five primary schools and 1 village in the Northern zones by SS de-mining commission.
- 65 households were reached with awareness and sensitization in Dengerchupu in Malakal; 153 children reached (74 females and 79 males) and 122 adults (67 females and 55 males). Peer to peer training was conducted with attendance of 50 children (29 boys and 21 girls) who will be training other children life skills about MRE in Malakal and the nearby villages.

*(Humanitarian Actors in this Sector are: United Nations Mine Action Office)*

#### **Non-Food Items (NFIs) & Emergency Shelter (from ...)**

- Efforts by Sector Partners in South Sudan continue to focus on assisting households affected by recent floods with essential non-food items (NFIs) and emergency shelter (ES).
- Jonglei State: CRS, Medair, and SSRRC distributed NFIs in five Bomas to 1,666 households affected by floods in Baidit Payam, South Bor County. The NFIs, consisting of 2,000 pieces of plastic sheeting, 4,000 sleeping mats and 4,000 mosquito nets, were donated and transported to CRS warehouse in Padak by UNICEF.
- Upper Nile State: NFI kits were distributed to 4,770 flood-affected households in Maban County, with Medair leading partners in distributions. Of the kits, 3,000 were from NFI Common Pipeline Project stocks, supplemented by additional kits from Medair's and GOAL's own resources. The assistance operation was implemented through a successful partnership of several actors, including: local chiefs and volunteers, ADRA, CAFOD, GOAL, Medair, OCHA, NPA, RCSO, SSRRC, RI, UNICEF, UNJLC and WVS.

*(Humanitarian Actors in this Sector are: (ACF-USA, Caritas, Concern, CSI-USA, Goal, ICRC, IOM, Mercy Corps, MSF-Swiss, SC-UK, SSRRC, UNICEF, WARDS, UNHCR, DCV, NCA, CRS, Medair, CAFOD, CONCERN, DRC, HAI, World Vision and UNJLC as sector lead. For details contact: [unjlc.juba@unjlc.org](mailto:unjlc.juba@unjlc.org) or visit [www.unjlc.org/sudan](http://www.unjlc.org/sudan))*

## V. ASSESSEMENTS AND MISSIONS

### USG/ERC John Holmes visited Juba from 27 – 28 November

- United Nations Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator, Mr. John Holmes, assured the Government of Southern Sudan (GoSS) of continued support in confronting critical humanitarian issues, particularly in the health sector. He urged continued donor support for this and for the huge construction and development effort still needed in the south, as well as accelerated efforts and investment in key areas from the Government of Southern Sudan themselves.
- Concluding a two day visit to Juba, Mr Holmes highlighted the necessity of putting in place basic services in health and education, and investing in infrastructure, first by rapidly building up the road system. Government of Southern Sudan capacity also has to be built further to enable them to take over the lead in all these key areas.
- Southern Sudan still has some of the worst child and maternal health indicators in the world. One child in every seven dies under the age of five. The most common causes of morbidity and mortality are preventable and treatable, with malaria accounting for over 40 percent of all health facility visits. One out of seven women dies as a result of child birth related causes. The majority of births are unassisted, as there are only 10 registered midwives in the whole of Southern Sudan. (*Source: UNOCHA Sudan Press Release*)

END

**Disclaimer:** The information in this report is consolidated from OCHA field reports, UN agencies, RCO at state level, NGOs, and other humanitarian partners. The report is subject to availability of data and does not claim to be exhaustive or fully verified. If you have inputs for the next edition, or questions/comments to the current issue, please contact: [maputseni@un.org](mailto:maputseni@un.org)