Increasing numbers of South Sudanese men, women and children fleeing conflict and food insecurity are seeking refuge in Sudan, overstretching basic services, including health services. WHO supports national health authorities and works with partners to respond to the needs of these refugees and to ensure they are protected against life-threatening diseases.

Almost 420 000 South Sudanese refugees are currently hosted in Sudan, of whom almost 140 000 arrived in 2017. In May 2017 alone, Sudan received almost 2000 new arrivals from South Sudan every day.

The majority of refugees have settled in camps in White Nile State, while others are in East Darfur State and West/South/North Kordofan states.

Many refugees arrive exhausted, having travelled for long periods of time with only a few personal belongings, and in need of shelter, protection, food and health care.

Most women and children have not received vaccinations for more than two years and their bodies are weak from hunger. As a result, they are more susceptible to vaccine-preventable and other communicable diseases.

The arrival of refugees from cholera-affected areas in South Sudan also increases the threat of importation of the disease into Sudan, placing both refugees and host communities at risk.

Once they arrive to Sudan, the refugees face overcrowding and lack of safe water and sanitation services, especially in camps and overcrowded host communities. These conditions increase the risk of waterborne diseases among refugees.
Suspected cases of acute watery diarrhoea have been reported in refugee camps in White Nile state, where more than 50,000 refugees are currently hosted.

Together with national health authorities, WHO is stepping up its response in White Nile State, including supporting treatment centres with medicines, medical supplies, operational costs and staff incentives.

In all states, WHO has trained rapid response teams and health staff on case management, case identification, and infection prevention and control.

To respond to the increasing risk of disease outbreaks, in June 2017 WHO and the Federal Ministry of Health are improving the Early Warning Alert and Response System (EWARS) – the system that detects outbreaks – by training 264 surveillance officers from 23 health facilities in six states.

The EWARS system will allow the early detection of possible outbreaks in areas like camps and overcrowded host communities, where the risk of outbreaks are high.

On 8 June 2017, WHO launched a vaccination campaign in two camps hosting South Sudanese refugees in South and West Kordofan states, with the goal of reaching a total number of 51,525 people over the age of one with the oral cholera vaccine (OCV) through two rounds of vaccinations.

To protect children against vaccine-preventable diseases, WHO and UNICEF supported a mass immunization campaign by the Federal Ministry Of Health in White Nile camps in April 2017 together, during which 1,600 children (6 months–15 years old) were vaccinated against measles, and 1,680 children (under 5 years) were vaccinated against polio.

To reduce the risk of diseases transmitted by mosquitoes, WHO conducted vector control campaigns which will protect around 6000 people. The campaign included indoor vector control activities and all breeding sites in targeted areas of White Nile and East Darfur camps were identified and treated.
The health of South Sudanese refugees in Sudan is a major priority for WHO and partners. As more refugees continue to arrive, protecting their health, and the health of vulnerable host communities, requires a coordinated effort by WHO and all health actors.

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