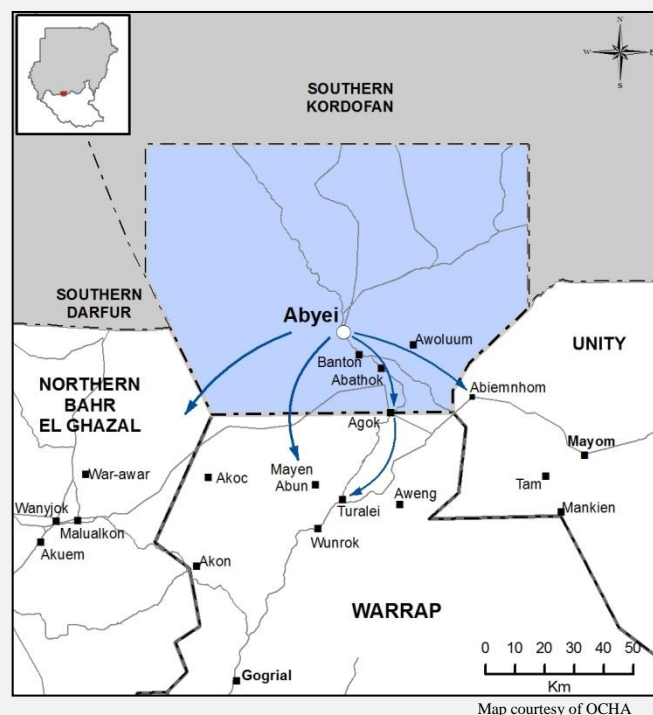


Highlights

- Health assessments are being carried out in affected areas. The identified immediate needs of the displaced people are shelter, food and water and sanitation. Due to the onset of the rainy season and population movement from Abyei the possibility of disease outbreaks increases namely diarrheal diseases, measles and meningitis.
- UN and NGOs have available adequate supplies as part of preparedness and human resources have been mobilized to meet urgent needs in Agok and surrounding areas. Extra staff can be brought in when the need arise.
- Immediate surgical services were initially provided in Agok and are currently being provided in Turalei and Gogrial.
- Mobile clinics are being organized to respond to the influx of those fleeing Abyei.
- Cluster meetings have been conducted in Juba and at state level in Warrap.



Situation

The security situation in Abyei area remains highly volatile with almost all Dinka population having moved out of the Abyei area, through Agok into Warrap and Northern Bahr El Ghazal States. For updates on the security situation, movements of population including figures, and over-all humanitarian response please refer to UN-OCHA's situation report - <http://reliefweb.int/node/404028>

Abyei hospital is currently not functioning and the Ministry of Health staff has been relocated to Agok.

It is expected that morbidity and mortality in children will be due to acute respiratory infections, diarrhea, malnutrition and malaria. The onset of the rainy season and population movement and due to the weak health system and infrastructure this might lead to an increase in cases.

The immediate needs of the displaced people are shelter, food and water and sanitation. With the influx of displaced population seeking shelter in the villages neighbouring Abyei, the existing PHC services offered in the PHC units is expected to be overstretched.

Health Sector Response

Coordination/ Field Assessment Missions

The State Ministry of Health (SMoH) and the World Health Organization (WHO) conducted a one-day mission to Muglad on 25 May. There were 71 admission with injuries recorded at Muglad hospital.

Also on 25 May an assessment mission with the Director of Primary Health Care, Warrap State Ministry of Health and WHO was conducted to Wunrock, Turalei and Mayen Abun where IDPs have started to gather. Based on an initial assessment the condition of IDPs is extremely difficult as most fled Abyei without assets or means. This is further compounded by the onset of the rainy season making travelling and living conditions bad.

Health cluster meetings were conducted in Juba on Monday 23 May and Wednesday 25 May. A health cluster coordination meeting was conducted in Kuajok, Warrap State, on 26 May. An inventory of most of the available stocks and resources was updated. Mapping of partners including surge capacity and constraints and gaps at state level has also been updated. The Health Cluster Coordination meeting will relocate to Wunrock since most of the health partners are now based there.

An inter-agency rapid assessment (IRA) was conducted in Turalei, Mayen Abun and Wunrock. Basic needs and gaps identified during the assessment were:

- The urgent need for a mobile clinic to support the existing health facilities especially in Turalei and Wunrock taking into consideration the expected influx of displaced population.
- In liaison with partners to ensure availability of antigens for immunization.

In neighboring Northern Bahr El Ghazal State, an interagency assessment was conducted in Aweil East county following reports of IDPs from Abyei area. The number of displaced people is yet to be verified by IOM.

Surge capacity and prepositioning

MSF-B has surgical capacity with one team on the ground in Gogrial town. It also has adequate supplies with an extra team on standby and surge capacity elsewhere.

In Agok, 2 **MSF-CH** surgical teams were relocated to Turalei where they are working with **Comitato Collaborazione Medica** (1 surgical team) where there are sufficient stocks and supplies. **MSF-CH** will establish two mobile clinics in Turalei to provide services to the population in Turalei.

GOAL is the main service provider in Twic County, and has reported adequate medical drugs and supplies in stock. They have been doing MUAC screening with nutrition teams. They have also been vaccinating children <1 year for measles. During today's meeting, **GOAL** indicated that at the rate the IDPs are coming in, existing static health units will be overwhelmed, hence the need for surge capacity to be mobilized. The **World Health Organization (WHO)** provided **GOAL** with two inter-agency emergency basic unit kits for their health facilities in Twic county. The **State Ministry of Health (SMoH)** supported **GOAL** with 4000 doses of TT to support EPI services to mothers and women of child bearing age in the displaced population.

A surgical team of **ICRC** will be in-country by end of the week. **ICRC** has adequate supplies and kits for management of trauma patients. It will initially be working in Malakal Hospital (Upper Nile State) and will be on standby to relocate to Twic County in the event that critical interventions are needed. **ICRC** indicated that it can provide mobile operational theaters.

World Vision International (WVI) will deploy a mobile clinic in the event that population of the displaced increases in Gogrial/Kuajok.

Ministry of Health-Government of Southern Sudan (MoH-GoSS) is mobilizing local health workers from the SMoHs of Warrap. WHO is supporting MOH in initiating the mobile clinics especially in Warrap state for Turalei and Wunrock while drugs will be available from the County Health Department and at the PHCU level in Turalei and Mayen Abun. A task force chaired by the DG of SMOH Warrap has been instituted to coordinate the response in Kuajok.

UNICEF supports the health response in terms of emergency supplies. Supplies are in Wau and Rumbek warehouses and the buffer stocks are in Juba (Interagency Emergency Health Kits – 20 Basic, 20 Malaria, 18 Supplementary).

UNFPA has prepositioned the minimum initial service package (MISP) kits and is expecting more emergency supplies to arrive in country. Cases of sexual and gender based violence will be supported by UNFPA.

UNFPA and UNICEF in South Kordofan and Abyei have available primary health kits (36 kits), mosquito nets (8300 pcs), oral rehydration salts (150 sachets), sodium lactate infusion (130 pcs), IMCI drug kits (13 kits), clean delivery and emergency contraception (198 kits), basic/comprehensive management for obstetrical emergencies (60 sets), and personal hygiene kits (2000 kits).

WHO has prepositioned emergency supplies in Warrap, Wau and Northern Bahergazel. Buffer stocks are in its Juba warehouse. Additional supplies are in the pipeline (Diarrheal Disease Kits and assorted emergency supplies). WHO will support the SMOH in controlling diarrhea diseases, measles outbreaks, meningitis and other communicable diseases that are bound to increase following displacement of the population.

WHO provided **NCA** with a basic unit kit for Alek PHCC and the neighboring areas.

WHO is supporting SMOH with 3 medical doctors, medical supplies and operational costs for Muglad Hospital. With this support, the hospital is now functioning 24/7. In addition, the **Sudanese Red Crescent Society (SRCS)** has assigned 5 volunteers to support in the hospital's first aid services.

WHO has available 19 rapid response kits, 4 diarrheal disease kits, 3 trauma kits A + B, and 2 trauma running bags in 17 hospitals and primary healthcare centers in South Kordofan and Abyei.

For more information contact:

Khartoum

Iman Shankiti
EHA Coordinator
+249912502286

shankitii@sud.emro.who.int , shankitii@gmail.com

Shahwaliullah Siddiqi
Health Cluster Coordinator – North Sudan
+249912174681

siddiqi@sud.emro.who.int , siddiqi19@hotmail.com

Juba

Mpairwe Allan
Emergency Coordinator
+249955372370, +249917259143

mpairwea@nbo.emro.who.int , ampairwe@yahoo.com

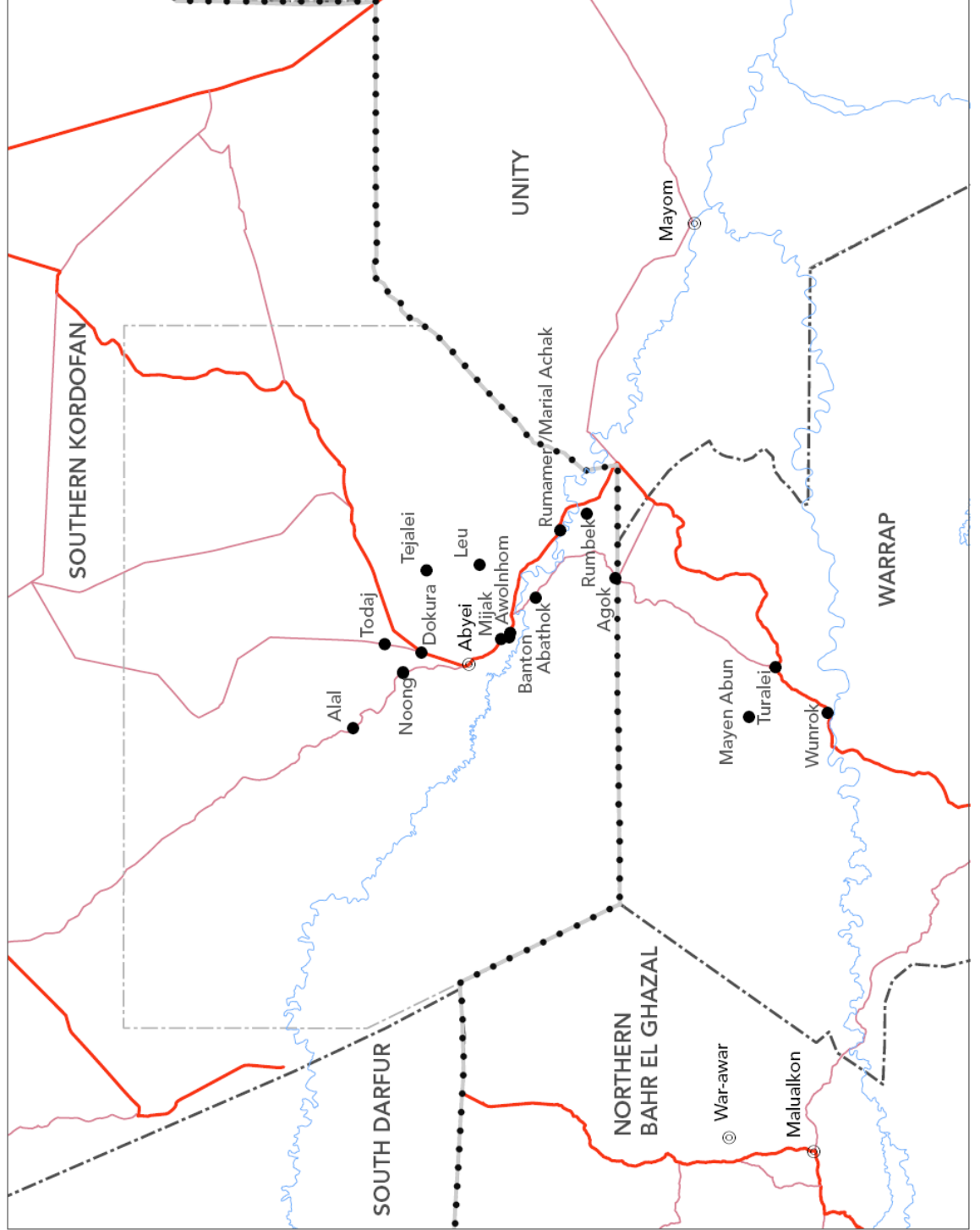
Eba Pasha
Health Cluster Coordinator – South Sudan
+24955314620

epasha@hotmail.com

Christina Banluta
Communications Officer
+249-923-971588, +249-912-160792

banlutac@sud.emro.who.int , christinabanluta@gmail.com

SUDAN : Abyei PCA Boundaries
22 May 2011



Legend

- State Capital
- ⊙ Principal Town
- Town/Settlement
- Primary Roads
- Secondary Roads
- River
- Locality Boundary
- State Boundary
- Abyei PCA Boundary

1:1-56

OCHA Sudan is funded by:
USAID/OFDA, Switzerland, ECHO, Italy and
Common Humanitarian Fund (Denmark, Ireland,
Netherlands, Norway, Spain, Sweden, DFD)

Map Doc Name: SU-Sudan-Abyei
Administrative Area_A4_Map
Creation Date: 22 May 2011
Projection/Datum: Geographic/GCS 1984
Web Resource: <http://ochaonline.un.org/sudan>
Nominal Scale at A4 paper size: 1:971,194

Map data source(s):
Admin Boundaries, Settlements (OCHA, SIM)

Disclaimers:
The designations employed and the
presentation of material on this map do not
imply the expression of any opinion
whatsoever on the part of the Secretariat of
the United Nations concerning the legal status
of any country, territory, city or area or of its
authorities, or concerning the delimitation of
its frontiers or boundaries.

