



Women participate in an IOM psychosocial support group. IOM/McLaughlin 2017.

The number of people in need of humanitarian assistance in South Sudan has increased to 7.6 million according to the 2017 Mid-Year Review of the Humanitarian Response Plan. The devastating crisis that broke out in December 2013 has displaced 3.9 million people, including 1.87 million displaced internally and 1.93 million others who have fled to neighbouring countries.

The crisis has been compounded by a cholera outbreak that began in June 2016, with more than 19,800 cases reported. The outbreak has showed a decline in recent weeks as relief agencies continue to respond to outbreaks and implement preventative interventions.

IOM Emergency Preparedness and Response (EPnR) teams are providing water, sanitation and hygiene (WASH) assistance in areas affected by the cholera outbreak. After completing the EPnR mission to Kapoeta, a team is currently in Mayom County, conducting cholera preparedness activities

following reports of a suspected outbreak in July. An EPnR team deployed to Boma County on 12 September to conduct a needs assessment after 48 suspected cases and three deaths were reported in the area.

IOM is rolling out comprehensive HIV services at the Bentiu, Malakal and Wau protection of civilian (PoC) sites. The services began in Bentiu in June and will begin in Malakal and Wau this month. IOM was previously providing prevention of mother-to-child transmission of HIV/AIDS, but now the entire PoC site population will have access to comprehensive services.

A Displacement Tracking Matrix (DTM) team conducted a biometric verification at the Malakal PoC site in early August, verifying 24,402 IDPs. This marks a decrease of more than 6,100 IDPs since the previous verification in February 2017 due to an outflux from March to early June 2017 when many IDPs moved towards Sudan and other areas of Upper Nile.

HIGHLIGHTS

IOM continues response to cholera outbreak across country

DTM completes biometric verification at Malakal PoC site

IOM hands over MHPSS programme in Bor to ALARM

KEY FIGURES

28 August - 10 September 2017

1.87 million

internally displaced persons (IDPs)

1.93 million

people displaced to neighbouring countries (Source: UNHCR)



125,000*

conflict-affected people accessed safe drinking water

*additional people reached through EPnR



26,045

health consultations conducted



10,860

reached with direct mental health & psychosocial support (MHPSS)



2,342 MT

S/NFI & WASH supplies transported through core pipelines in 2017



354.5 MT

humanitarian cargo transported for IOM & humanitarian partners

Bentiu PoC Site

IOM provides multi-sector humanitarian assistance to approximately 114,700 IDPs at the Bentiu PoC site. As camp manager, IOM coordinates humanitarian services and maintains site infrastructure and the Humanitarian Hub.

This week, maintenance teams had to pump water from the retention pond to prevent flooding after heavy rains brought the water level to the top of the basin.

A DTM team began a biometric registration on 4 September for new arrivals and newborn babies. To date, a total of 2,123 new arrivals have been registered, as well as 1,939 newborns added to existing households..

During the first two weeks of September, 1,053 people entered the site (the majority reporting insecurity as the reason) and 2,124 exited (the majority

Wau

IOM and relief agencies continue to respond to the humanitarian needs of approximately 46,900 people displaced in Wau town, including 32,676 IDPs (per August headcount; 39,165 registered since April) at the PoC site adjacent to the UNMISS base, 147 at the PoC site inside the UNMISS base and 14,138 at collective centres (Cathedral, Nazareth, Lokoloko, St. Joseph and Hai Masna).

IOM continues rehabilitation of Zone A of the Wau PoC site, which is the most congested PoC site in the country. Since May, 9,063 people have been relocated to rehabilitated areas that provide better drainage, access to services and space between shelters to provide fire breaks.

As part of regular hygiene promotion activities, eight massive awareness sessions of menstrual hygiene management were conducted in neighborhoods of Wau town, benefiting to 743 individuals during the second week of September.

Malakal PoC Site

IOM is responding to the humanitarian needs of nearly 24,402 IDPs at the Malakal PoC site. IOM continues to provide WASH and health care assistance, as well as conduct site improvement and maintain the Humanitarian Hub.

IOM Displacement Tracking Matrix (DTM) team conducted a biometric verification exercise at the PoC site from 1 – 11 August, covering four sectors and 48 blocks of the PoC site. A total of 24,402 individuals, or 9,184 households, were verified. The population dropped significantly since the last verification in February 2017, when 30,551 individuals were verified. The decrease in the population size was due to the massive out-flux of people from March into early June 2017 when many IDPs moved towards Sudan to seek refuge in White Nile refugee camp while others settled within Upper Nile, particularly in Renk and Melut counties. Additional information [online](#).



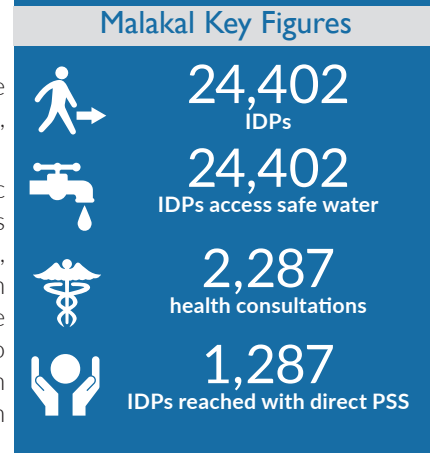
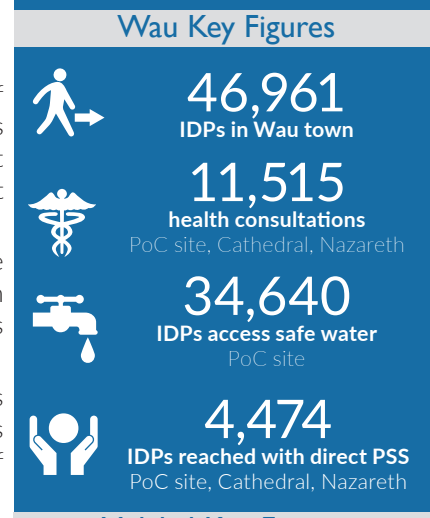
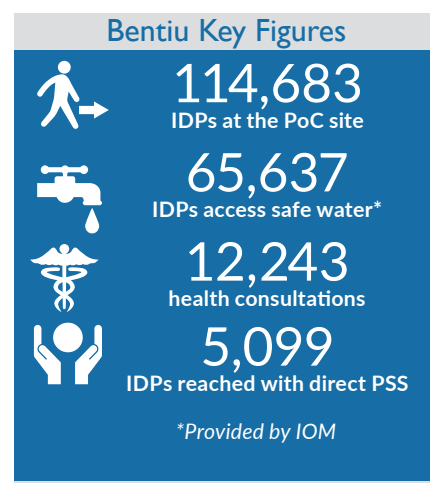
CCCM Enumerator conducts a CCCM Satisfaction Survey at the Wau PoC site. IOM/Mominee 2017.

Melut PoC Site

IOM provides WASH services to over 300 IDPs at the Melut PoC site in Upper Nile. IDPs are receiving an average of 34.6 L of safe drinking water per person per day (according to population count data collected by IOM WASH). WASH staff continue the maintenance of sanitation facilities, as well as hygiene promotion focused on disease prevention.

Bor PoC Site

On 15 August, IOM handed over its mental health and psychosocial support (MHPSS) programme to an NGO partner (see page 3 for more information). IOM continues to manage the Humanitarian Hub to shelter humanitarians working at the site.



Rapid Response, EPnR, Frontline



Distribution in Mayom. IOM/Gordon 2017.

IOM EPnR WASH team is conducting a cholera preparedness response in Mayom County following reports of a suspected cholera outbreak in June and July. The response includes hygiene promotion, hand pump repair and distribution of WASH relief items, targeting Mayom town and Mankien, Riaak and Wangkai payams.

Another EPnR team deployed to Boma County on 12 September to conduct a needs assessment following reports of 48 suspected cholera cases, including three deaths.

During the first two weeks of September, IOM reached more than 2,400 people in Bentiu town with hygiene promotion messages through group sessions, house-to-house visits and jerry can cleaning campaigns.

IOM distributed basic household hygiene kits to 6,500 people in Gumuruk for households displaced by insecurity in Jonglei. The distribution followed an assessment that found that displaced households, mainly women and children, were fetching drinking water from the river, putting them at high risk of diarrhea diseases, as well as sleeping in schools, churches and under trees.

IOM continues to operate the village boreholes drills in Rubkona County in areas with high needs of water and vulnerable communities to assist returnees from the Bentiu PoC site. IOM sent an EPnR team to assess vulnerable locations and will drill boreholes using the village drill rig, focusing on 10 locations with highest priority and benefiting 5,000 individuals.

In late August, Shelter/Non-Food Items (S/NFI) frontline teams distributed relief kits to 250 vulnerable households in the Greater Baggari Area, south of Wau town. Humanitarian access to Baggari and other areas south of Wau town has been sporadic since July 2016.

IOM supported a mission led by the Norwegian Refugee Council (NRC), with Polish Humanitarian Action (PAH) and Support for Peace and Education Development Program, to distribute shelter and relief items to 3,400 households in Terekeka. The households were displaced to Terekeka due to intercommunal fighting in May 2017.

With NRC and PAH, IOM deployed to Chuil, Jonglei, to conduct a needs assessment of shelter and NFI needs and distribute relief items to 1,720 vulnerable households.

In Focus: IOM Hands Over MHPSS Services in Bor PoC Site

Since early 2014, IOM has provided direct MHPSS services at the Bor PoC site, with the overall goal of responding to the impact of the armed conflict that broke out in December 2013 and forced millions from their homes. A pilot MHPSS project kicked off in Bor in 2014 with a needs assessment.

Over the course of three years, the programme covered capacity building for humanitarian actors; recreational and cultural initiatives for children, youth and adults; vocational trainings for groups with specific needs; activation and facilitation of peer-support groups; provision of lay counselling; conflict mediation and peacebuilding.

On August 15, IOM officially handed over its MHPSS activities in Bor to the African Leadership and Reconciliation Ministries (ALARM). IOM will continue to provide technical support in the form of refresher training sessions, provision of technical tools and remote advising to ALARM until the end of the year.

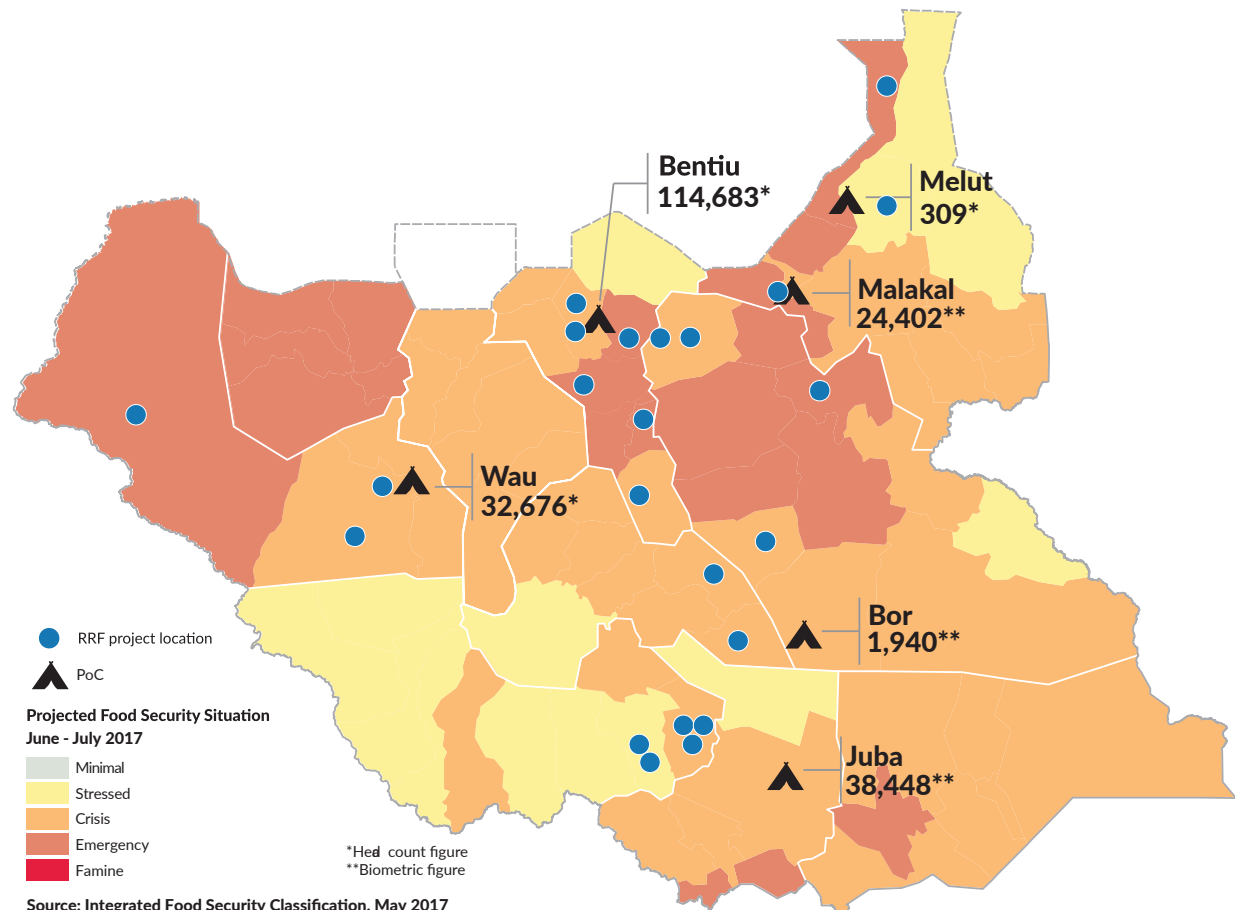


IOM hands over MHPSS programme to ALARM at the Bor PoC site. IOM/Geng 2017.

Rapid Response Fund (RRF)

With funding from USAID's Office of U.S. Foreign Disaster Assistance, IOM manages the RRF to support relief agencies across the country to swiftly implement specific emergency interventions. RRF has started a new round of funding for the 2017-2019 cycle. Agriculture and Food Security sector is newly added as an emergency response sector to support populations affected by natural or man-made disasters. The RRF continues to support partners through Health, Nutrition, Humanitarian Coordination, Protection, Shelter/NFI, and WASH sector responses. The RRF team has met with the NGO Forum and Clusters to present the Fund's new sectors and guidelines.

Globally, IOM seeks to strengthen its engagement with national and international NGOs as part of its commitment to the Principles of Partnership. To further this goal, 70 organizations met in Nairobi, Kenya, including partners of the RRF South Sudan, to discuss best practices and identify areas where further cooperation is possible.



Source: Integrated Food Security Classification, May 2017

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