

South Sudan

Integrated Disease Surveillance and Response (IDSR)

Epidemiological Bulletin Week 17, 2020 (April 20 – April 26)



Major Epidemiological Highlights in week 17 of 2020

- In week 17, 2020 IDSR reporting completeness was 88% and timeliness was 86% at health facility level. EWARN reporting completeness was 86% and timeliness was 84%
- Of the 111 alerts in week 17, 2020; 72% were verified 0% were risk assessed and 0% required a response. Malaria (33), AWD (15), measles (9) and bloody diarrhea (27) were the most frequent alerts in week 17, 2020
- Total of 133 COVID-19 alerts were reported and investigated to date.
- A cumulative of 58 confirmed COVID-19 cases and isolated in Juba (57) & Torit (1). A total of 299 contacts listed, quarantined and under follow up.

SURVEILLANCE PERFORMANCE

For the Integrated Disease Surveillance (IDSR)
network and Early warning alert and response
network (EWARN)

IDSR Timeliness and Completeness Performance at Facility Level for week 17, 2020

Completeness States Ranking	States	Supporting Partners	Total No. of Functional Health Facilities in the State	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of Time	Completeness Percentage
1st	WES	AMREF, World Vision, CUAMM, CDTY, OPEN	213	212	100%	212	100%
2nd	CES	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO	117	112	96%	112	96%
3rd	Lakes	Doctors with Africa (CUAMM), LIVEWELL	113	107	95%	108	96%
4th	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	120	109	91%	111	93%
5th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	130	110	85%	115	88%
6th	EES	Cordaid, HLSS, CCM	146	117	80%	117	80%
7th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	150	118	79%	126	84%
8th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID	115	88	77%	92	80%
9th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS	91	69	76%	75	82%
10th	WBGZ	Cordaid, Healthnet TPO, CARE International	76	50	66%	53	70%
	South Sudan		1271	1092	86%	1121	88%

KEY

	<60%	Poor
	61%-79%	Fair
	80%-99%	Good
	100%	Excellent

The timeliness of IDSR reporting (supported by EWARS mobile) at health facility level was 86% and completeness was 88%. 9 states were above the target of 80% with highest reporting rate in WES with completeness of 100%.

IDSR Timeliness and Completeness Performance at County Level for week 17, 2020 (1)

STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Lakes	Cueibet	Doctors with Africa (CUAMM)	15	15	100%	15	100%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	7	100%	7	100%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	23	100%	23	100%
Lakes	Yirol West	Doctors with Africa (CUAMM)	12	12	100%	12	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%
NBGZ	Aweil North	HealthNetTPO,IHO	33	33	100%	33	100%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	15	100%	15	100%
WBGZ	Wau	Cordaid	27	27	100%	27	100%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	16	16	100%	16	100%
CES	Morobo	SSUHA,THESO	5	5	100%	5	100%
CES	Juba	HLSS	42	42	100%	42	100%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	23	96%	23	96%
CES	Yei	SSUHA	18	17	94%	17	94%
NBGZ	Aweil West	HealthNetTPO	37	34	92%	34	92%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	10	91%	10	91%
Lakes	Wulu	Doctors with Africa (CUAMM)	14	12	86%	12	86%
Lakes	Awerial	Doctors with Africa (CUAMM)	7	6	86%	6	86%
CES	Terekeka	HealthNetTPO	25	20	80%	20	80%
CES	Lainya	SSUHA	16	12	75%	12	75%
NBGZ	Aweil East	IRC,TADO	36	24	67%	24	67%
WBGZ	Jur River	Cordaid	35	19	54%	19	54%
WBGZ	Raja	HealthNetTPO	14	7	50%	7	50%

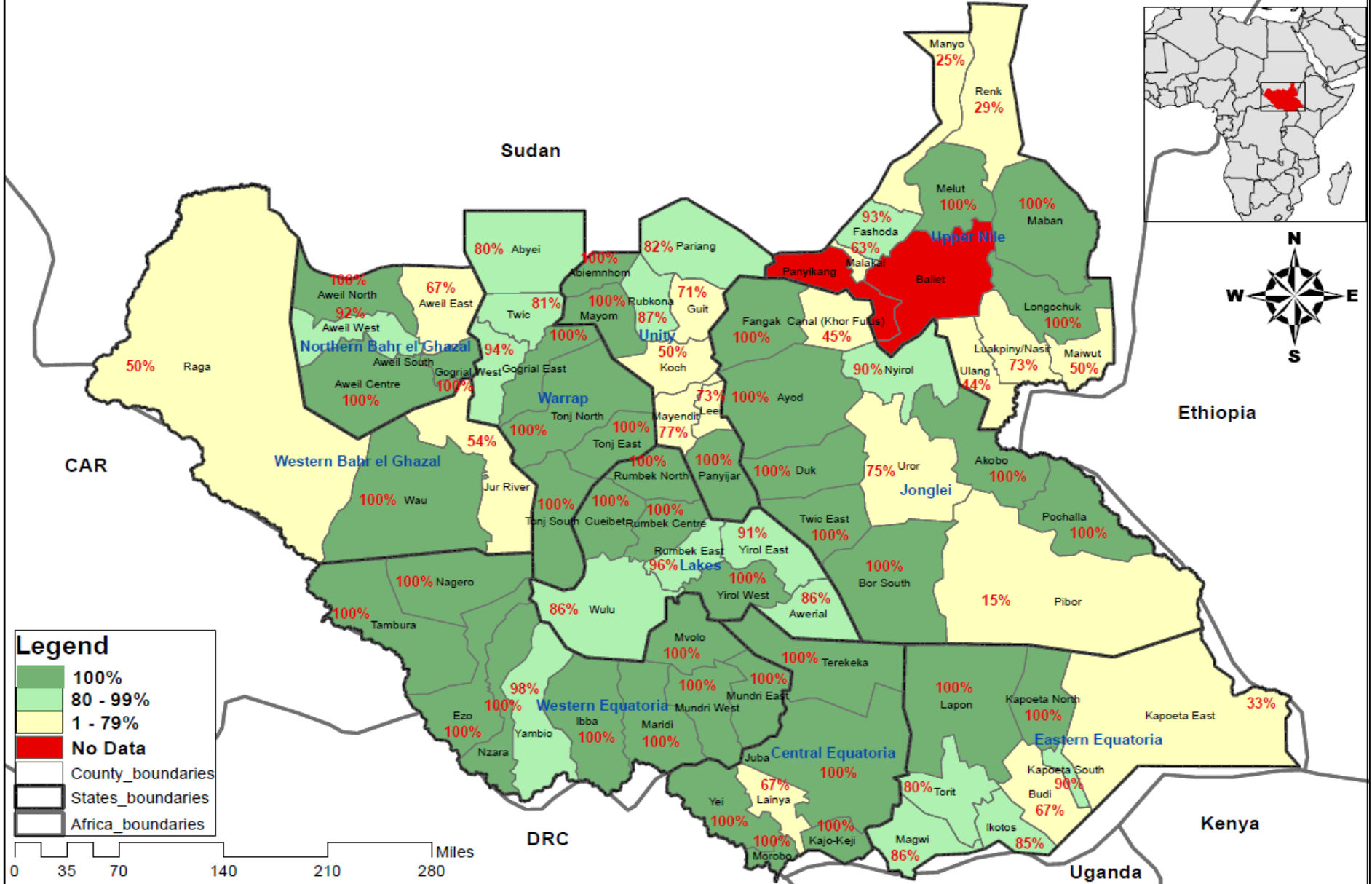
STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Unity	Abiemnhom	Cordaid	4	4	100%	4	100%
Unity	Panyijjar	IRC	15	15	100%	15	100%
WES	Nzara	World Vision International	20	20	100%	20	100%
WES	Nagero	World Vision International	10	10	100%	10	100%
WES	Mundri West	CUAMM	21	21	100%	21	100%
WES	Maridi	AMREF	26	26	100%	26	100%
WES	Ibba	AMREF	11	11	100%	11	100%
WES	Mundri East	CUAMM	19	19	100%	19	100%
WES	Ezo	World Vision International	27	27	100%	27	100%
WES	Mvolo	CUAMM	11	11	100%	11	100%
WES	Tambura	World Vision International	26	26	100%	26	100%
WES	Yambio	World Vision International	42	41	98%	41	98%
Unity	Mayom	CASS	9	8	89%	9	100%
Unity	Pariang	CARE International	11	9	82%	9	82%
Unity	Rubkona	Cordaid,IRC,IOM,MSF	15	12	80%	12	80%
Unity	Mayendit	CASS	13	10	77%	10	77%
Unity	Koch	CRADA,IRC.	4	3	75%	3	75%
Unity	Leer	UNIDOR	11	8	73%	8	73%
Unity	Guit	CHADO	7	0	0%	5	71%

IDSR Timeliness and Completeness Performance at County Level for week 17, 2020 (2)

STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HF's Reported on Time	Timeliness Percentage	No. of HF's Reported regardless of time	Completeness Percentage
Jonglei	Bor	MDM + JDF	35	35	100%	35	100%
Jonglei	Pochalla	LIVWELL	7	7	100%	7	100%
Jonglei	Akobo	NILE HOPE	8	8	100%	8	100%
EES	Lopa Lafon	HLSS	18	18	100%	18	100%
EES	Kapoeta North	CCM	16	16	100%	16	100%
Jonglei	Nyirrol	CMA,Malaria Consortium	10	9	90%	9	90%
EES	Kapoeta South	CCM	10	9	90%	9	90%
Jonglei	Fangak	CMD,HFO	16	14	88%	14	88%
Jonglei	Duk	MDM + JDF	15	13	87%	15	100%
Jonglei	Ayod	CMD,EDA	15	13	87%	14	93%
EES	Magwi	HLSS	22	19	86%	19	86%
EES	Ikotos	HLSS	27	23	85%	23	85%
EES	Torit	Cordaid	20	16	80%	16	80%
Jonglei	Uror	Nile Hope,Malaria Consortium	8	6	75%	6	75%
Jonglei	Twic East	MDM + JDF	11	7	64%	11	100%
EES	Budi	Cordaid	21	13	62%	13	62%
Jonglei	Canal Pigi	IMC	11	5	45%	5	45%
EES	Kapoeta East	CCM	12	3	25%	3	25%
Jonglei	Pibor	LIVWELL,CRADA	5	1	20%	2	40%

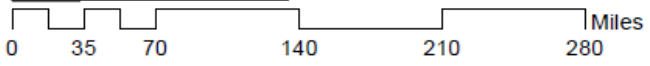
STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HF's Reported on Time	Timeliness Percentage	No. of HF's Reported regardless of time	Completeness Percentage
Warrap	Gogrial East	GOAL	15	15	100%	15	100%
Warrap	Tonj East	CCM	12	12	100%	12	100%
Warrap	Tonj North	CCM	14	14	100%	14	100%
Warrap	Tonj South	CCM	12	12	100%	12	100%
Upper Nile	Maban	WVI + RI	16	16	100%	16	100%
Upper Nile	Melut	WVI + RI	8	8	100%	8	100%
Upper Nile	Longechuk	RI	9	9	100%	9	100%
Upper Nile	Fashoda	CORDAID	14	13	93%	13	93%
Warrap	Gogrial West	GOAL	31	27	87%	29	94%
Warrap	Twic	GOAL	26	21	81%	21	81%
Warrap	Abyei	AAA,Save the Children,MSF	10	8	80%	8	80%
Upper Nile	Luakpiny Nasir	UNKEA,RI	26	19	73%	19	73%
Upper Nile	Maiwut	RI	10	5	50%	5	50%
Upper Nile	Makal	IMC	8	4	50%	4	50%
Upper Nile	Ulang	UNKEA,RI	18	8	44%	8	44%
Upper Nile	Manyo	CORDAID	8	2	25%	2	25%
Upper Nile	Renk	WVI + RI	14	3	21%	4	29%
Upper Nile	Akoka	IMC	5	1	20%	4	80%
Upper Nile	Baliet	IMC	5	0	0%	0	0%
Upper Nile	Panyikang	IMC	4	0	0%	0	0%

Map showing completeness of reporting by county in week 17, 2020.



Legend

- 100%
- 80 - 99%
- 1 - 79%
- No Data
- County_boundaries
- States_boundaries
- Africa_boundaries



Disclaimer: The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.



Surveillance | EWARS surveillance performance indicators by partner week 17, 2020

Partner	HFs	Reporting		Performance	
PARTER	# OF SITES	# of reports received on Time	No. of HFs Reported regardless of time	Timeliness	Completeness
CMD	1	1	1	100%	100%
GOAL	2	2	2	100%	100%
HAA	4	4	4	100%	100%
HFO	2	2	2	100%	100%
HLSS	1	1	1	100%	100%
IOM	12	12	12	100%	100%
IRC	1	1	1	100%	100%
MDM	10	10	10	100%	100%
Medair	2	2	2	100%	100%
MSF-E	6	6	6	100%	100%
SMC	6	6	6	100%	100%
TRI-SS	2	2	2	100%	100%
World Relief	2	2	2	100%	100%
IMA	9	8	8	89%	89%
UNKEA	6	4	5	67%	83%
MSF-H	5	3	3	60%	60%
UNIDOR	2	1	1	50%	50%
IMC	5	2	2	40%	40%
RHS	3	1	1	33%	33%
UNH	2	0	0	0%	0%
TOTAL	83	70	71	84%	86%

- Completeness was 77% and timeliness was 61% for weekly reporting in week 16, 2020 for partner-supported clinics serving IDP sites.

EVENT-BASED SURVEILLANCE

Alert management including detection;
reporting; verification; risk assessment; & risk
characterization

Alert by disease and Hubs in Week 17, 2020 [A total of 111 event specific alerts generated by state]

State	Acute jaundice syndrome	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	Bloody Diarrhoea	Malaria (Confirmed)	Measles	Neonatal Tetanus	Total alerts
CES		2	2		3	1		8
EES		1		9	9			19
Jonglei						1		1
NBGZ		3	3		1	4	1	12
Unity	2	2	2	2	4	1		13
Upper Nile		2		5	1			8
Warrap			4	9	2	1		16
WBGZ		1	1	2				4
WES		13	3		13	1		30
Total alerts	2	24	15	27	33	9	1	111

During this week:

- 2 AJS alert: all are been responded
- 24 ARI: 9 are undergoing verification, 15 been monitored
- 15 AWD alert: 6 undergoing verification, 9 been monitored
- 27 ABD: 12 undergoing verification, 15 been monitored.
- 33 Malaria alerts: 13 undergoing verification, 19 under monitoring, 1 under response
- 9 Measles alert: 5 undergoing verification and 4 under monitoring
- 1 Neonatal Tetanus alert: undergoing verification

Number of HF with ARI alerts in wk 17	List of HF with ARI alerts in wk 17	Comments following verification
2	Bhar Mayen PHCC	The In-charge had wrongly diagnosed some cases of pneumonia and Lower Respiratory Tract Infection and classified them as RTIs which caused the alert
	Kuom PHCU	The CSO found out that the In-charge had failed to properly diagnosed measles like symptoms of four children and classified them as RTI cases which also caused the alert. All these were also discussed with the WHO focal person
2	Achana Aweil PHCU	In Achana PHCU the In-charge was not found in health facility but the team met one patient presented with cough, fever, vomiting and difficulty breathing after he met a trader in the market who had cough and flu, no history of travel in the last 14 days. He reported that, he got treatment from the clinic and recovered.
	Mariaal Bai PHCC	Team met the clinician and In charge and had discussion about the IDSR specifically ARI alert reported in week 17. It was found out that, the case reported was common Respiratory tract infection, which were treated and recovered.
1	Yosia PHCU	No cases of ARI to cause alert in week17 with 00 report in facility register. However, 39 cases were reported under URTI presenting with cough (20 Under 5yrs; 19Above 5ys) which is not an outbreak alert
1	Lobonok PHCC	The CHD CSO made follow-up on ARI alert cases reported through the facility In-charge. The cases were all bacterial pneumonia and simultaneously treated using Antibiotics. This followed onset of heavy rain and concomitant cold weather.
1	Moli Tukoro PHCU	Confirmed to be an ordinary cough case and the person has recovered.
2	Mboroko PHCU	The team verified Mboroko PHCU data both in DHIS2 and at facility, and there were no cases reported for ARI in week 17.
	Ngamunde PHCC	Ngamunde PHCC has been non-functional since September 2019 due to insecurity
3	Kediba PHCC	Findings showed that no patient was fitting the SARI case definition in week 17. The reported patients, one was asthmatic, the rest had cough and chest pain
	Movo PHCU	The reported patient had chest pain, cough, and headache with a temperature of 37.8. RDT tested positive for malaria. He also did not fit the criteria of SARI.

Number of HF with ARI alerts in wk 17	List of HF with ARI alerts in wk 17	Comments following verification
	Wiroh PHCU	The reported symptoms were pneumonia not fitting SARI.
3	Kulundu PHCU	This is a nonfunctional facility (since 2016) and we do not receive IDSR reports at the CHD
	Karika PHCU	No SARI case was reported by Karika PHCU in week 17. This was also confirmed in the register. However, Kotobi PHCC reported one case in week 17. Kotobi is not far from Karika and the sent excel file did not mention of Kotobi. The surveillance officer discovered that this patient was asthmatic and had an acute asthmatic attack with mild wheezing not fitting the SARI case definition. The in charge was further taken through the SARI case definition. He had also reported 3 cases in week 18 who were discovered to be two pneumonia cases (cough, crepitations on auscultation) and the third one was asthma.
	Mandi PHCU	This is a nonfunctional facility and we do not receive IDSR reports at the CHD
1	Mvolo PHCC	No cases of ARI to cause alert in Wk17 with 00 report in facility register. However, 39 cases were reported under URTI presenting with cough (20 Under 5yrs; 19Above 5ys) which is not an outbreak alert
1	Sangua II PHCU	There was false reporting because of the knowledge gap of the health worker on how to correctly report alerts. The team checked around the community and no acute ARI cases were reported.
2	Maluok PHCU	confirmed to be an error during the reporting time
	Meer Island PHCU	confirmed to be an error during the reporting time
2	Police HQs PHCC	SMOH Surveillance Office Mr. Gordon Mayen that all ARI alerts in Lakes State, specially the listed health facilities were verified from week 16 up to week 18 and findings already shared with WHO Juba office. However, there were RTI cases but no case meant for investigation or sample collection

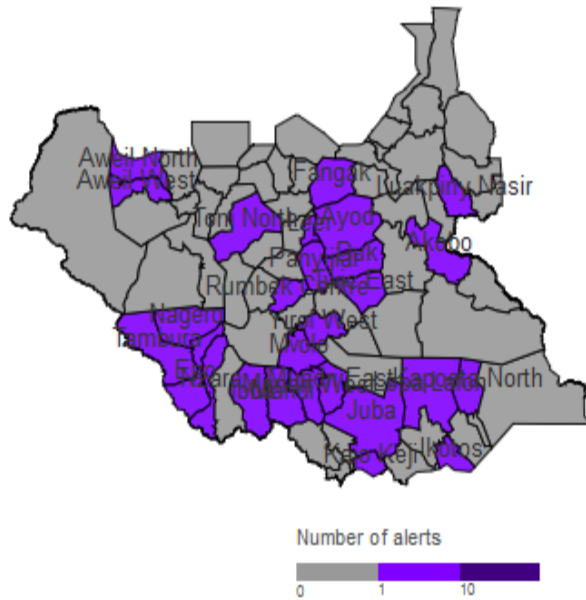
Number of HF with ARI alerts in wk 17	List of HF with ARI alerts in wk 17	Comments following verification
1	Source Yubu PHCC	WV team together with the CHD and WHO conducted a verification exercise regarding the ARI alert in Source Yubu. The reported alert case did not meet the case definition for COVID-19. However, a total of 11 cases of ARI were seen and treated in Source Yubu PHCC in Epi. week 17 of which 8 cases were under five and 3 adults.
1	Guba (Lila) PHCU	as for Rumbek centre
2	Magbuka PHCU	No hard copy of weekly IDSR for week 10-17 at the CHD. No data in the DHIS. The surveillance team visited the HF and found it closed. It's non HPF supported, no drugs, non functional. The team took quick interviews in the community ascertain any report of acute ARI in the community and the feedback was none.
	Kasia PHCU	No hard copy of weekly IDSR for week 10-17 at the CHD. No data in the DHIS. The surveillance team visited the HF and found it closed. It's non HPF supported, no drugs, non functional. The team took quick interviews in the community ascertain any report of acute ARI in the community and the feedback was none

VERIFICATION OF WATERY DIARRHEA CASES IN ACHANA PHCU IN AWEIL WEST

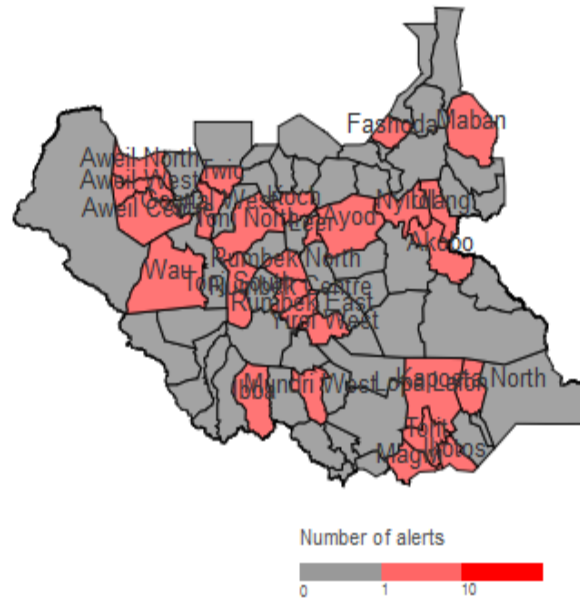
	Achana PHCU Aweil West	The team did not find the health worker at the PHCU, however we managed to meet with the health supervisor with the rest of community members, the community member and Payam health supervisor admitted that the diarrheal cases are available, the health supervisor and the community member met suspected that the cause of this diarrhea could be the use of certain tree for fishing that kills fish and people ate those fish for survival, the name of tree the used for fishing is Dambush.
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Alert | Map of key disease alerts by county week 17, 2020

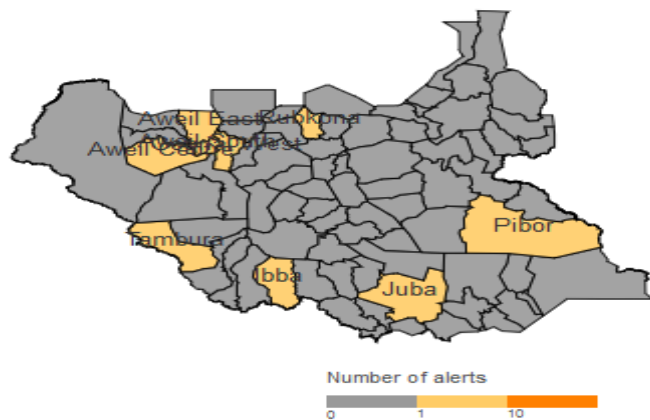
Map 2a | Malaria (W17 2020)



Map 2b | Bloody diarrhoea (W17 2020)



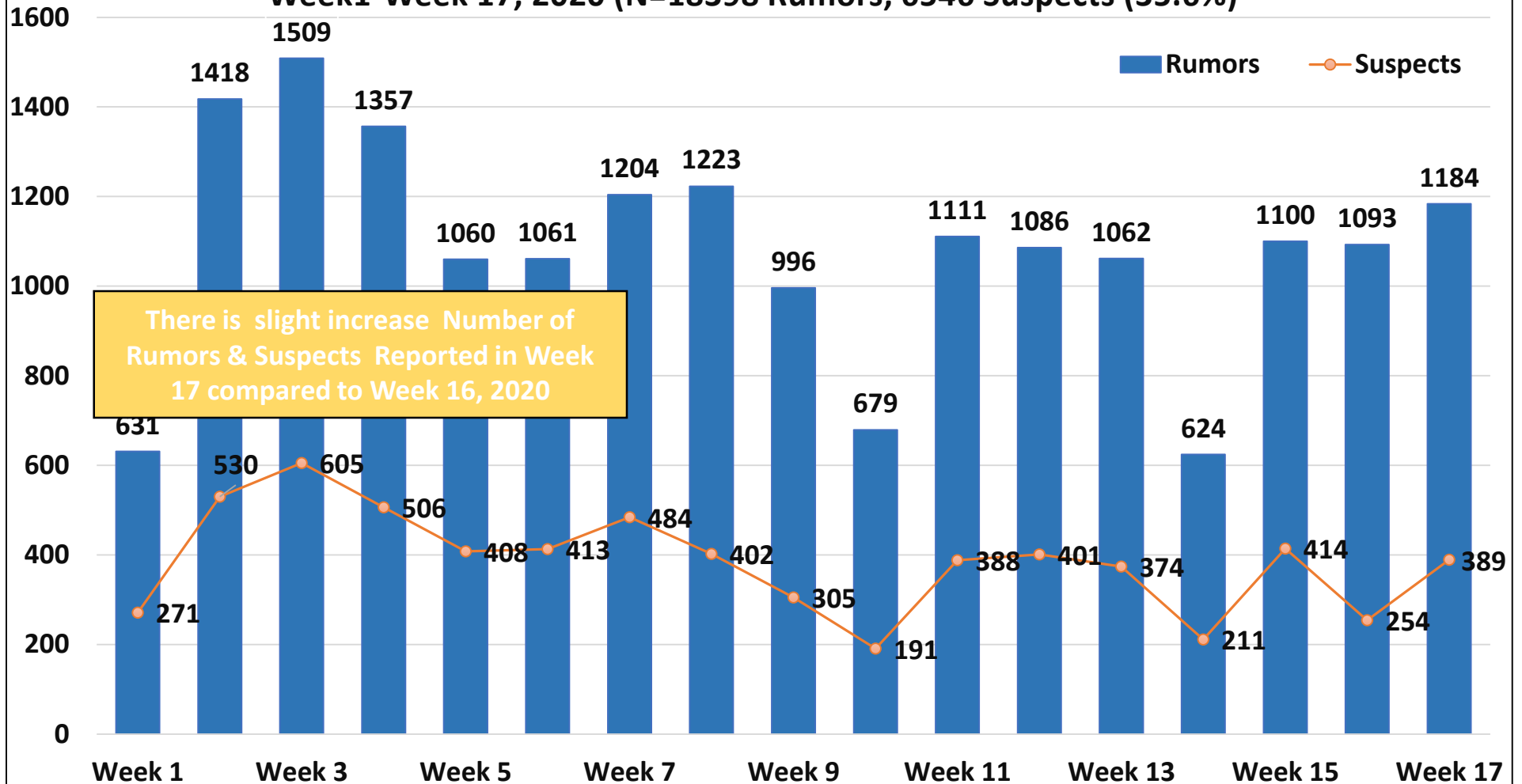
Map 2c | Measles (W17 2020)



W17	Cumulative (2020)	
1	5	Low risk
1	1	Medium risk
1	23	High risk
2	45	Very high risk
72%	73%	% verified
0%	0%	% auto-discarded
2%	2%	% risk assessed
1%	2%	% requiring a response

CUMULATIVE: Guinea Worm Rumors and Suspects

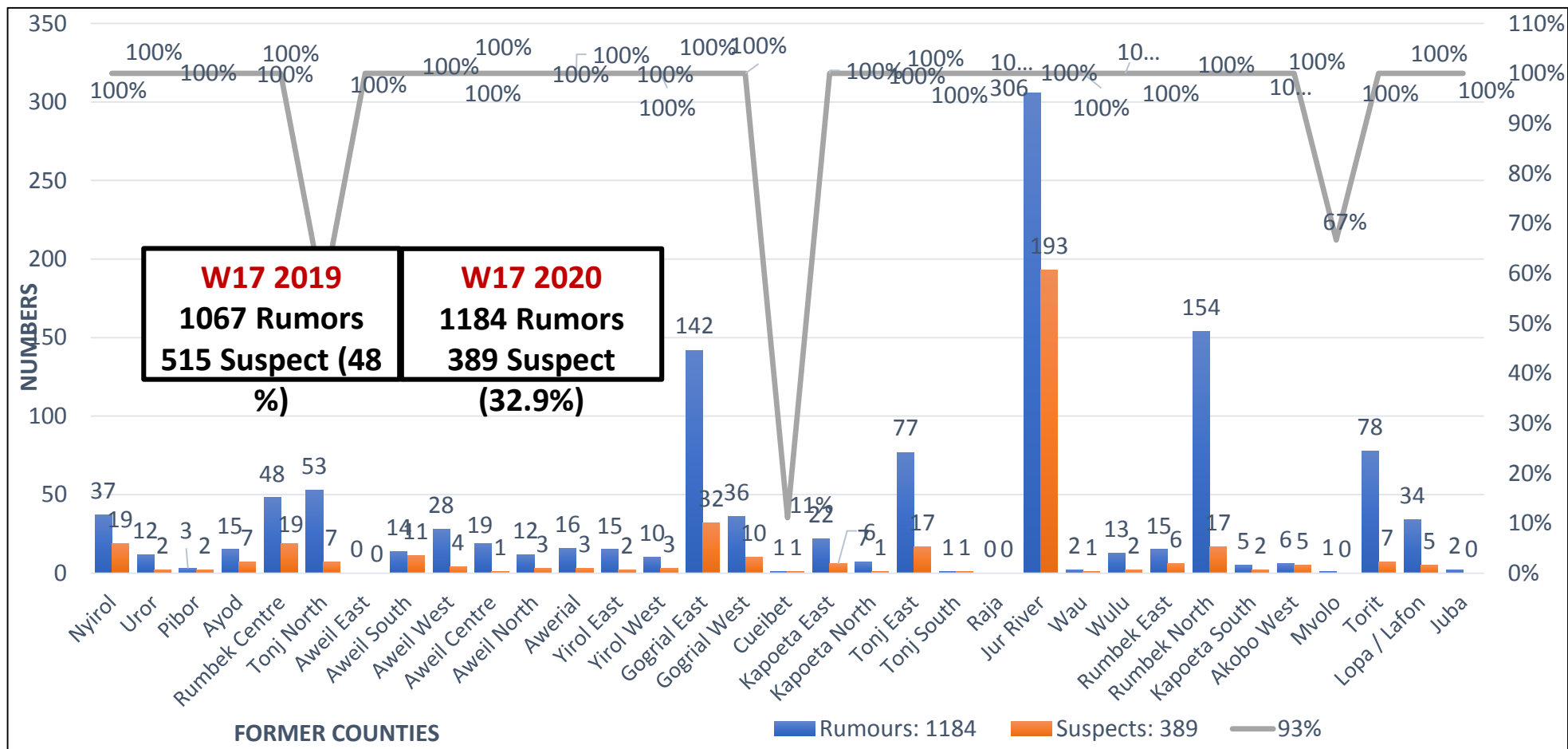
Week1-Week 17, 2020 (N=18398 Rumors, 6546 Suspects (35.6%))



There is slight increase Number of Rumors & Suspects Reported in Week 17 compared to Week 16, 2020

There is 8% Increase in the Number of Rumors and Suspects reported in Week 17 Compared to Week 16.

Former Counties that reported Rumors, and Suspects during 19th – 25th April 2020 (17th Week) (n=32)



The Reporting Rate for Week 17 Stands at 93%

It's important to Note that the number of Rumors reported in W17 of 2019 is lower than the Rumors reported in 2020. However there is a decreased in number of Suspects reported in the same week of 2020 compared to 2019.

In week 16 Jur river reported the highest number of Rumors and suspects, followed by Gogrial East County.

SUSPECTED OUTBREAKS IN 2019

Major suspected outbreaks in South Sudan in
2020

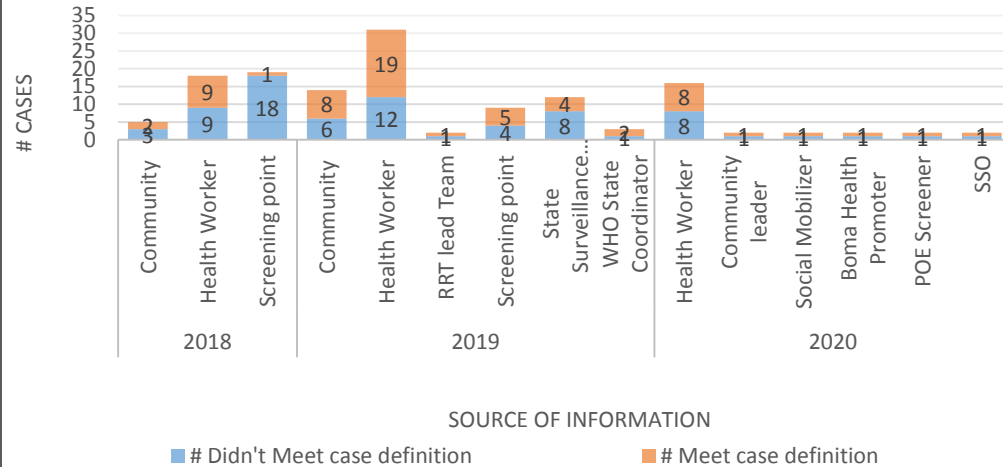
EVD Suspect cases in South Sudan 2018 and 2019 as of week 11, 2020

Met EVD cases definition			
2018	30	12	42
Community	3	2	5
Health Worker	9	9	18
Screening point	18	1	19
2019	32	39	71
Community	6	8	14
Health Worker	12	19	31
RRT lead Team	1	1	2
Screening point	4	5	9
State Surveillance Officer	8	4	12
WHO State Coordinator	1	2	3
2020	13	13	26
Health Worker	8	8	16
Community leader	1	1	2
Social Mobilizer	1	1	2
Boma Health Promoter	1	1	2
POE Screener	1	1	2
SSO	1	1	2
Grand Total	75	64	139

- Since August 2018, at least 139 suspect EVD cases have been reported, of which:
- 26 (18.7%) have been reported in 2020
- Most of the suspect EVD cases have been reported by health workers at health facility level
- One alert was reported in week 11, 2020

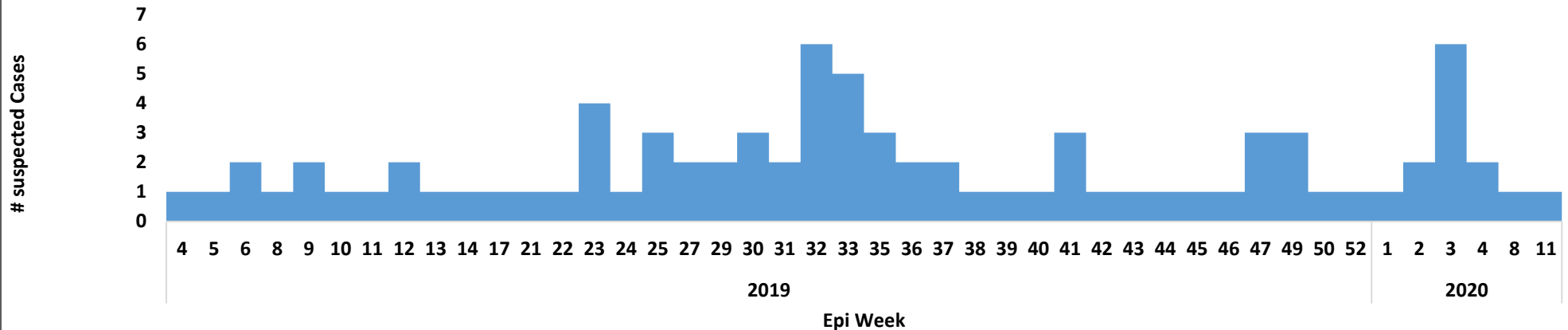
EVD Suspect cases in South Sudan 2018, 2019 and 2020 as of week 11, 2020

NUMBER OF CASES THAT MET AND DID NOT MEET EVD CASE DEFINITION FROM 2018 TO 2020 BY SOURCE OF INFORMATION



- Most of the suspect EVD cases have been reported in adults 18 years and above (72%)
- Similarly, most suspect EVD cases have been reported in males (56%)
- The distribution suspect EVD cases in both children <18years and adults ≥18yrs is skewed towards the males

EVD suspected cases by epi week and EVD cases definition (CD), South Sudan - 2019 and 2020.



Response | Suspect epidemics; Current Malaria trends 17, 2020

Malaria was the leading cause of morbidity and mortality, accounting for **45.6%** of all morbidities and **3.1%** of all mortalities in week 16, 2020

There is 5 Counties with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

- **Bor hub (Ayod , Fangak ,Pibor)**

Proposed public health actions:

1. Malaria taskforce of malaria technical working group meeting to ensure that operational readiness for malaria prevention, diagnosis, and treatment are optimized.
2. Field missions to conduct technical verification of the trends in the affected counties
3. Assessment of current stock levels of malaria diagnostics (RDTs), medicines (ACTs), and LLINs.
4. Stocking up on malaria prevention (LLINs), diagnostics (RDTs), medicines (ACTs), and enhancing behavioral change communication for malaria prevention, prompt investigation and treatment

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

Brief epidemiological description and public health response for active outbreaks and public health events

Response | Summary of major ongoing outbreaks in 2019 and 2020

Aetiological agent	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
					Case management	Vaccination	Health promotion	WASH
Ongoing epidemics								
Hepatitis E	Bentiu PoC	03/01/2018	11	276 (0.39)	Yes	No	Yes	Yes
Measles	Bentiu PoC	24/04/2019	5	440 (0.11)	Yes	Yes	Yes	N/A
Measles	Aweil East	29/12/2019	17	316 (0.053)	Yes	No	Yes	N/A

● Measles outbreaks confirmed in 2020

- ❑ 5 counties – Tonj East, Magwi, Bor, Kapoeta East and Tonj South
- ❑ Locations with ongoing measles transmission
 - Aweil East
 - Bentiu PoC
- ❑ No new confirmed outbreak

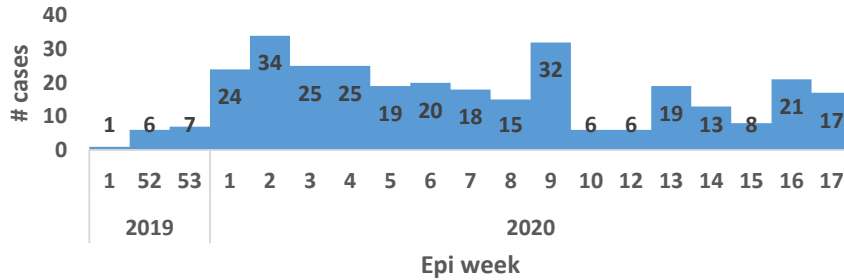


Measles Outbreak situation & response by county as of week 17, 2020

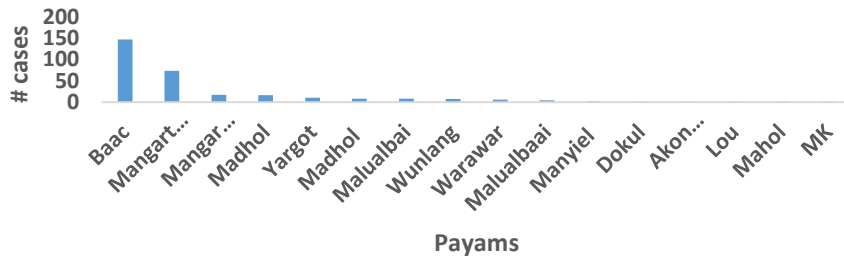
S/N	County	Population	Confirmed cases	Probable cases	Total cases	Cases per 100,000	Total deaths	CFR %	Date first reported	Emergency Campaign	Admin Coverage	Implementing Partner	Status	Comments
1	Tonj East	183,233	13	48	61	33.3	0	0	12-Dec-19	Mass Campaign	Pending result	Mass Campaign	controlled	Mass Campaign Completed
2	Magwi	272,880	5	5	10	3.7	0	0	19-Sep-19	Mass Campaign	Pending result	Mass Campaign	controlled	Mass Campaign Completed
3	Bor	320,956	7	7	14	4.36	0	0	17-Jan-19	Mass Campaign	115.60%	Mass Campaign	controlled	Mass Campaign Completed
4	Kapoeta East	262,720	6	10	16	6.1	0	0	18-Jan-20	Reactive Campaign (Jebel Boma)	Reactive Campaign to start on 26 Feb 2020	IRC	active	Reactive Campaign completed in March 2020
5	Aweil East	519,537	16	195	316	39.4	0	0	2-Jan-20				active	
6	Bentiu Poc	115,479			440	83	2	2	1-Jan-19	Reactive campaign	126%	IOM	Active	Reactive campaign 20 Jan 2020
Total		777,069	47	265	857	47.46	0	0						

Confirmed Measles Outbreak in Aweil East County

Measles cases in Aweil East from week 52, 2019 to week 17 2020.



Measles cases in Aweil East by Location from week 52, 2019 to week 17 2020.



Descriptive Epidemiology:

- Initial cases were reported on 2nd Jan 2020
- A total of 316 suspected measles cases have been line listed in Aweil East county
- Majority of the cases were from Baac and Mangartong payams
- 17 new cases were reported in week 17, 2020
- (160) 51% of the cases are less than 5 years of age
- Male were 56% of cases and female were 44%

Response and Recommendations – REFER TO MY

RECOMMENDATIONS IN MY COMMUNICATION TO PAULINO

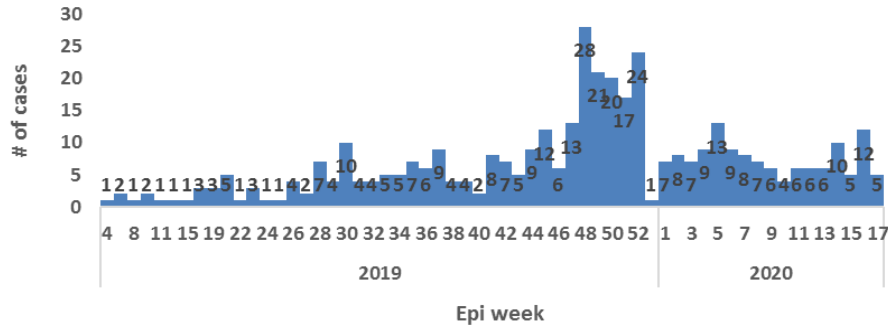
- Reactive campaign was finalized in Aweil East on 24th January 2020 by SMOH and IOM, coverage was 119% and PCE coverage was 91.5%. Plans is ongoing for second reactive campaign.
- Majority of the cases reported this week were from Baac payam with administrative coverage of 73% which is not sufficient to interrupt transmission.
- Total of 21 samples were; 10 tested measles IgM +ve and 2 rubella IgM positive.
- Surveillance and line-listing are ongoing
- Case management is ongoing

Age group	Cases	% Cases	Cum. %
0 - 4 Years	160	51%	51%
15+ Years	66	21%	72%
5 - 9 Years	49	16%	87%
10 - 14 Years	41	13%	100%
Grand Total	316	100%	

Response | Confirmed epidemics

Confirmed Measles and Rubella outbreak in Bentiu PoC

Measles cases in Bentiu from week 04, 2019 to week 17, 2020



Measles cases in Bentiu by Location from 2018 to 2020.



Epidemiological description

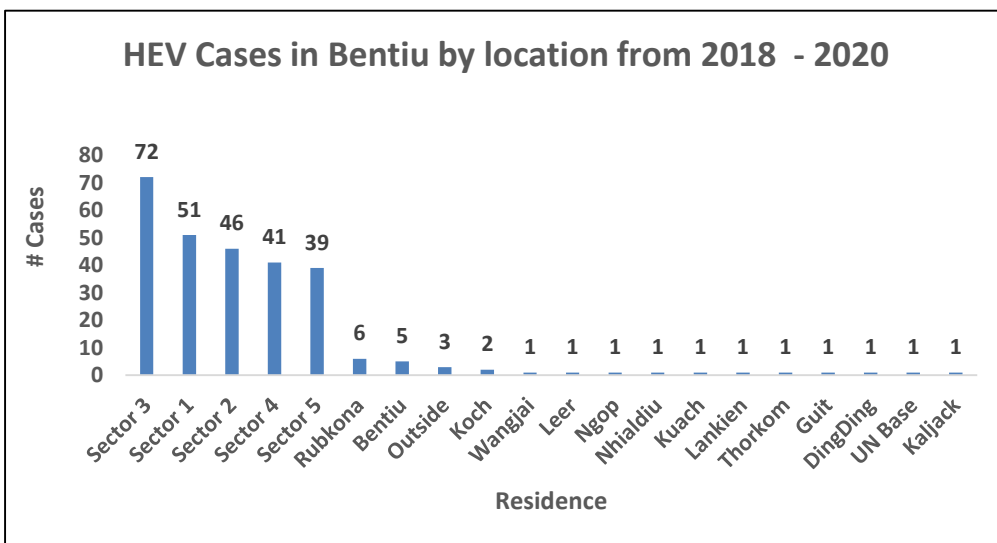
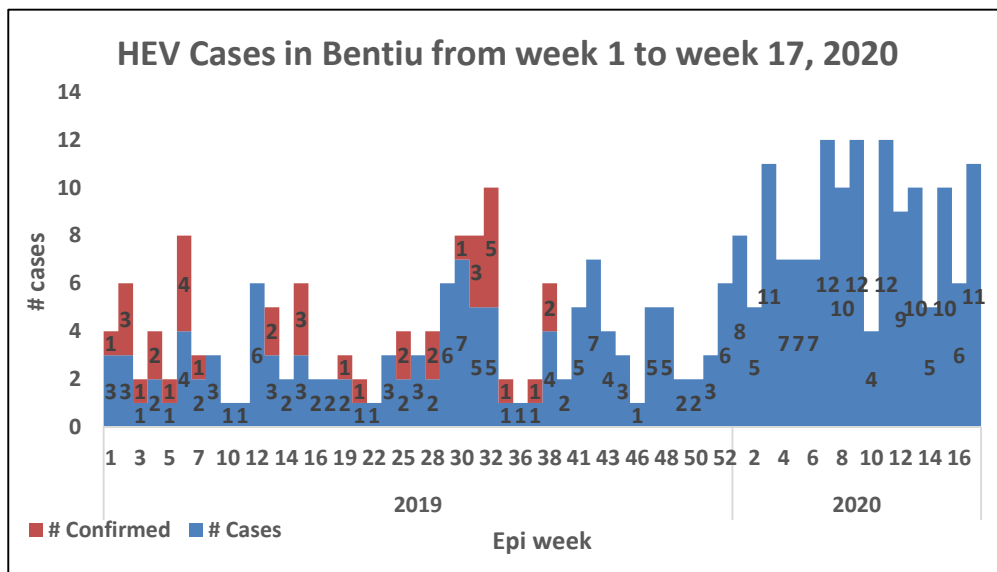
- Bentiu PoC has been reporting suspected measles/rubella cases since week 4 of 2019.
- 5 new cases reported in week 17, 2020
- At least 440 measles cases including 1 death (CFR 0.23%) reported since then.
- Cumulatively, 36 tested cases have tested measles IgM positive while 15 tested rubella IgM positive.
- 47% of cases are female and 53% are male
- 95% are under 5 yrs old, 5% are 5 yrs old and above
- Cases have been reported from inside and outside the PoC with most of the cases originating from the PoC (most cases from sector 5 but generally all the sectors are affected).

Response actions

- Several rounds of reactive campaigns were conducted in Bentiu IOM:
 - IOM completed a reactive campaign in Bentiu POC on 31 May 2019, with 21,285 children 6-59 months and coverage of 126% receiving measles vaccination. PCE was done by MoH & WHO, coverage was 74.6%.
 - Another campaign was conducted by SMOH, IOM and partners which was completed during the week of 20th January 2020 with coverage of 126%.
 - Partners advised to collect samples from suspect cases.

Age Group	Cases	Percentage	Cum. %
0 - 4 Years	417	95%	95%
5 - 9 Years	13	3%	98%
10 - 14 Years	7	2%	99%
15+ Years	3	1%	100%
Grand Total	440	100%	

Hepatitis E, Bentiu PoC (1)



Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 276 cases since beginning of 2019
- There were (11) new cases reported in week 17, 2020
- All the cases were managed as outpatient cases except for seven cases who were admitted
- Two deaths one on 12th, April 2019 and the second on 11th July 2019
- 50% are female and 50% are male.
- Age group less than 15 years had the most cases with (75%) cases.
- At risk of adverse outcomes when infected in the 3rd trimester of pregnancy
- Use of unsafe drinking water likely to be source of infection
- Up to week 17, 2020; there were 276 cases of HEV in Bentiu PoC including 2 deaths (CFR 0.72%)

Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	92		92	33%	0%	33%
10 - 14 Years	46		46	17%	0%	50%
15+ Years	66	2	68	25%	3%	75%
5 - 9 Years	69	1	70	25%	1%	100%
Grand Total	273	3	276	100%	0.01	

Recommendations

- Supportive case management guided by the HEV protocol is ongoing
- KEV messages on HEV prevention should continue within the community through HPs, CHWs and Kondial Radio
- With current COVID -19 Pandemic Outbreak, WASH partners to increase the coverage of hand washing facilities within the PoCs community.
- Other Wash intervention like increasing the access for clean water and improving the water storage in the affected individuals should be made urgently by distributing the water storage containers that will be the only way to mitigate this problem and stop the HEV outbreak.
- The WASH Cluster/HEV task force should engage in group discussion with Community leaders and woman group at water distribution points to understand their opinions on issue of Collapsing Jerrycans distribution.
- Monitoring the FRC levels at the taps stands in the different sectors, and the concentration of chlorination should maintain at 0.5-1mg/L as the point of collection

Response | Summary of major controlled outbreaks in 2019 and 2020

Aetiological agent	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
					Case management	Vaccination	Health promotion	WASH
Controlled epidemics								
Measles	Juba	21/11/2019	NR	6(0.1667)	Yes	No	Yes	N/A
Measles	Tonj East	12/12/2019	NR	61(0.98)	yes	Yes	Yes	N/A
Measles	Bor	17/01/2020	NR	14(0.214)	yes	No	yes	N/A
Measles	Jebel Boma	10/12/2019	NR	96(0.063)	yes	No	Yes	N/A
Measles	Kapoeta East	18/01/2020	NR	16(0.625)	yes	No	Yes	N/A

EBOLA VIRUS DISEASE[EVD] PREPAREDNESS IN SOUTH SUDAN

Brief on the Ebola situation in DR Congo and updates on EVD preparedness in South Sudan

Ebola update DRC 28 April 2020

Current situation

- Currently as of 26 April 2020
- 3461 Cases [3318 confirmed & 143 probable]
- 2279 Deaths [2185 confirmed & 94 probable]

Response update

- From 20 to 26 April 2020, there have been no new confirmed cases of Ebola virus disease (EVD) reported in the Democratic Republic of the Congo

Novel Coronavirus

Novel Corona Virus Situation Summary

- Situation update as of 5th May, 2020

Situation in numbers (by WHO Region)

Total (new cases in last 24 hours)

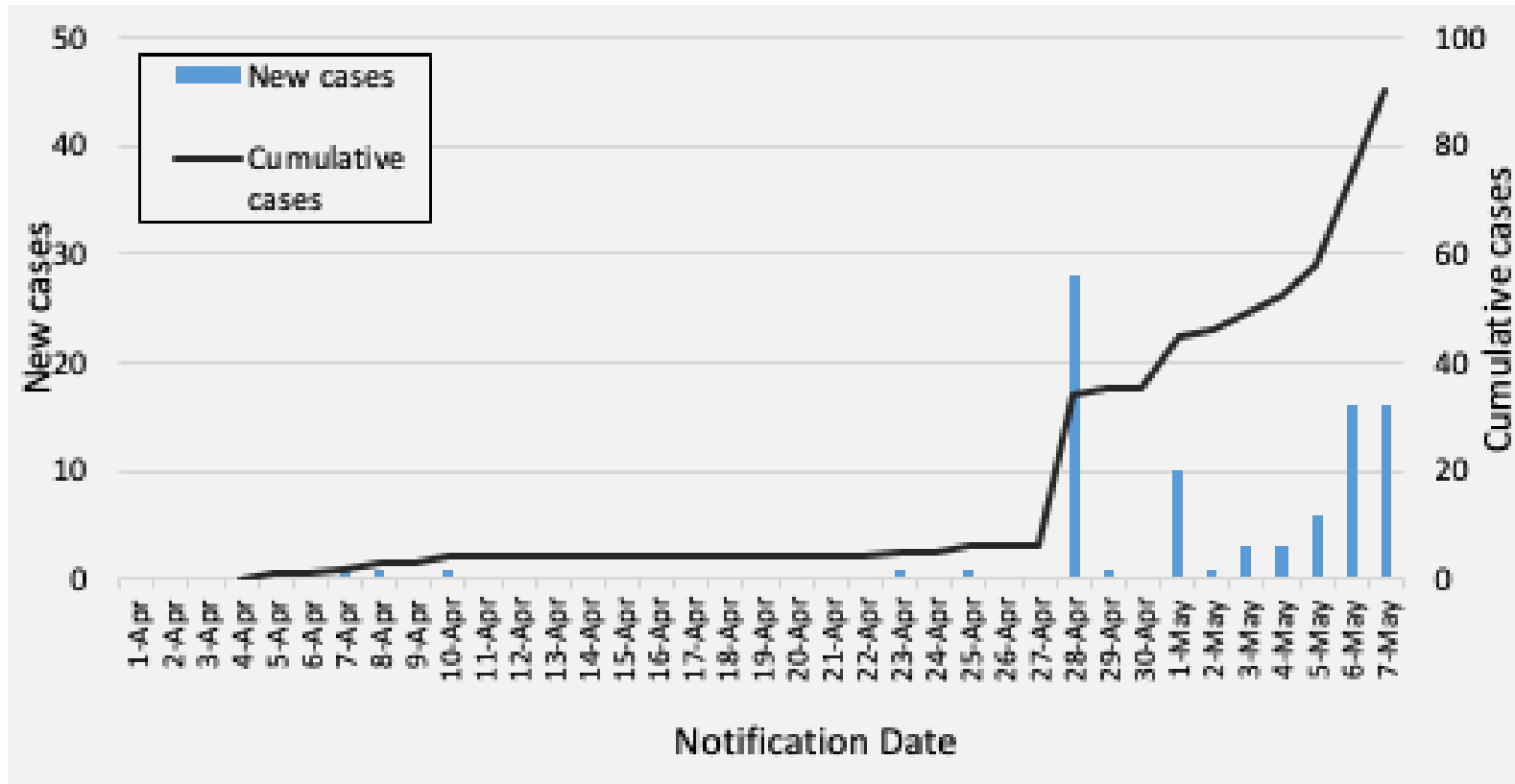
Globally	3 517 345 cases (81 454)	243 401 deaths (3797)
Africa	32 570 cases (2036)	1112 deaths (27)
Americas	1 477 447 cases (43 691)	79 590 deaths (1763)
Eastern Mediterranean	213 376 cases (7077)	8115 deaths (144)
Europe	1 566 684 cases (22 539)	145 602 deaths (1615)
South-East Asia	72 688 cases (5015)	2682 deaths (219)
Western Pacific	153 868 cases (1096)	6287 deaths (29)

WHO: <https://www.who.int/health-topics/coronavirus>

COVID-19 Response in South Sudan

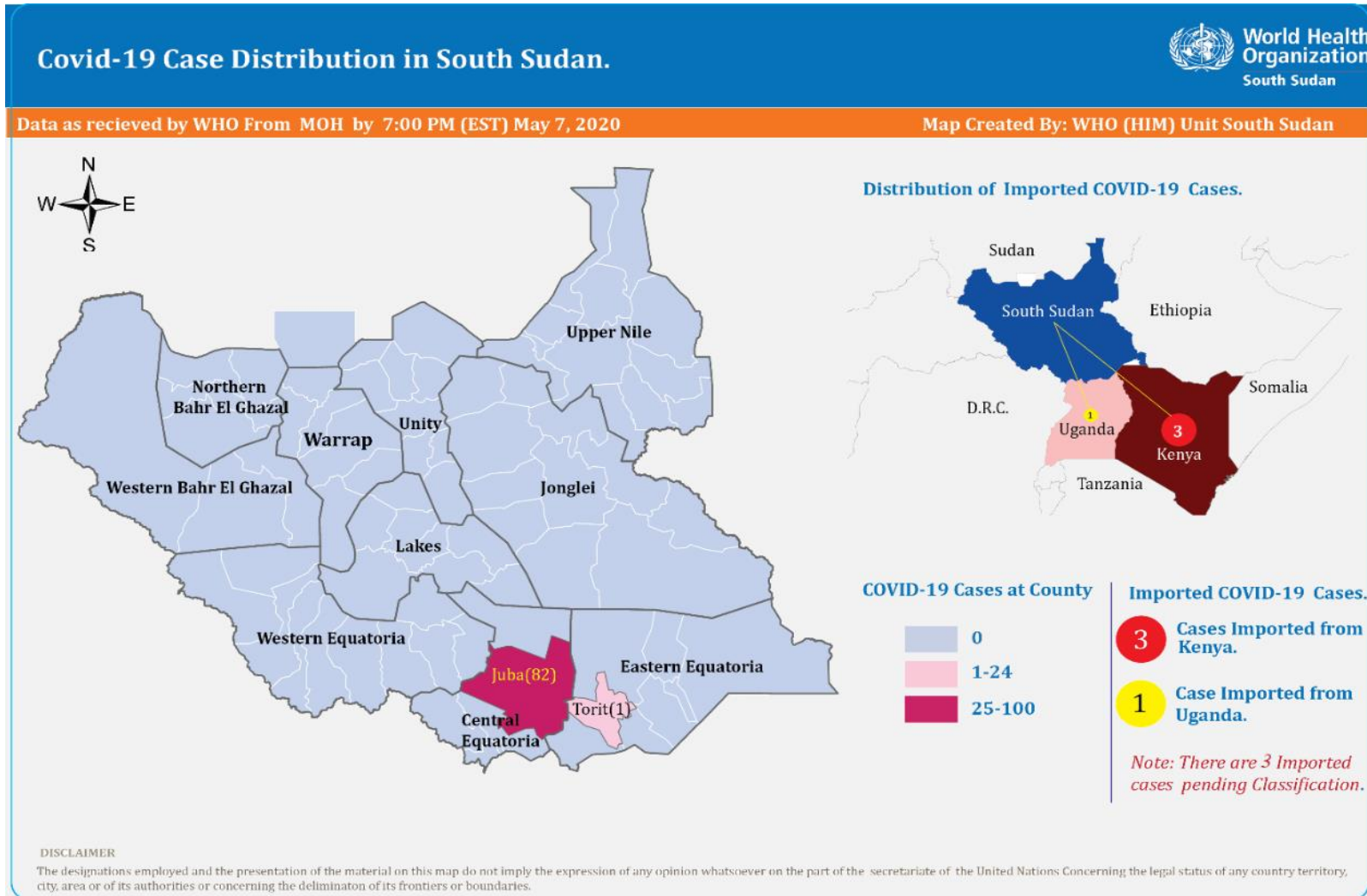
- 58 confirmed COVID-19 cases in South Sudan; 57 in Juba and 01 in Torit; with 299 contacts identified, quarantined, & undergoing follow up
- Active surveillance is ongoing to determine if there is active transmission in Juba and surrounding areas.
- The ILI/SARI sentinel sites have been expanded from 10 to 45 in Juba
- Implementation of priorities; risk communication; active case search and testing; quarantine for contacts; infection prevention and control; and management of cases are currently underway
- The overall response currently led by the COVID-19 high level taskforce and the COVID-19 steering committee

Trends of COVID-19 cases in South Sudan



- COVID-19 cases increasing exponentially in the past 10 days

Distribution of COVID-19 cases in South Sudan



The majority of the cases have been reported in Juba; one case in Torit ; while the rest have been imported (involving truckdrivers from the neighboring countries

Overall Conclusions and Recommendations

Conclusion

- The overall IDSR and EWARN reporting performance in week 18, is below the target of 80%. Seven (09) states were above 80%
- 58 COVID-19 cases confirmed and isolated in Juba (57) and Torit (1). A total of 299 contacts identified, quarantined and under follow up.
- With five outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- There are ongoing measles outbreaks in Bentiu PoC and Aweil East.
- Given the COVID-19 pandemic, it is critical that measures are stepped up to contain its spread.

Recommendations

- All partners should support CHDs & HF in Upper Nile and other states to improve IDSR/EWARN reporting
- Measles surveillance and case management advised in response to the outbreak in Aweil; which sample collection should be prioritized in response to the cases in Bentiu PoC.
- Strengthen capacities for COVID-19 containment through identifying and testing suspect cases, isolating confirmed cases, and quarantining contacts

Thanks to the State Surveillance Officers, County Surveillance Officers and Health Facility in-charges for sharing the weekly IDSR data

Thanks to all partners for supporting IDSR weekly reporting and sharing the line lists

To access the IDSR bulletins for 2020 use the link below:

<https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2020>

This bulletin is produced by the Ministry of Health with Technical support from WHO

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Notes

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The data has been collected with support from the EWARS project. This is an initiative to strengthen early warning, alert and response in emergencies. It includes an online, desktop and mobile application that can be rapidly configured and deployed in the field. It is designed with frontline users in mind, and built to work in difficult and remote operating environments. This bulletin has been automatically published from the EWARS application.

More information can be found at <http://ewars-project.org>

