

# South Sudan

**Integrated Disease surveillance and response (IDSR)**

**Epidemiological Bulletin Week 47 of 2020 (November 16-  
November 22)**



World Health  
Organization  
South Sudan



- In week 47, 2020 IDSR reporting completeness was 89% and timeliness was 82% at health facility level. EWARN reporting completeness was 79% and timeliness was 77%
- Of the 122 alerts in week 47, 2020; 78% were verified 0% were risk assessed and 0% required a response. Malaria (34), AWD (30), ARI (24), measles (1) and bloody diarrhea (25) were the most frequent alerts in week 47, 2020
- Four alerts being investigated; suspected cholera alert from Akobo; suspected VHF in LEER County; acute watery diarrhoea in IDP camp in Mangalla/ Juba county; and bird die-offs in Yirol West county
- Malaria remains the top cause of morbidity and accounted for 85,412 cases (63.9% of OPD cases)
- A total of 1,546 COVID-19 alerts have been investigated with 1,356 (87.7%) being verified. Total of 3,064 COVID-19 confirmed cases and 60 deaths, CFR of 2.0%
- Other hazards include floods in 43 counties; malaria in 7 counties; measles in Pibor, Ibba and Wau; HEV in Bentiu PoC; and suspected HEV in Abyei

# SURVEILLANCE PERFORMANCE



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



# IDSR timeliness & completeness performance at county level for week 47 of 20202



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	119	114	96%	115	97%
3rd	Lakes	Doctors with Africa (CUAMM), LIVEWELL	113	103	91%	106	94%
4th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	131	108	82%	123	94%
5th	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	119	108	91%	110	92%
6th	WBGZ	Cordaid, Healthnet TPO, CARE International,IOM	75	33	44%	68	91%
7th	EES	Cordaid, HLSS, CCM	142	94	66%	121	85%
8th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS,IOM	88	71	81%	72	82%
9th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID,Samaritans Purse,IOM	120	83	69%	91	76%
10th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	109	78	72%	78	72%
	South Sudan		1229	1004	82%	1096	89%

## 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 82% and completeness was 89%. (8) states were above the target of 80% with highest reporting rate in WES.

# IDSR timeliness & completeness performance at county level for week 47 of 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 East	Doctors with Africa (CUAMM)	24	24	100%	24	100%
Lakes	Awerial	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%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	11	100%	11	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	17	17	100%	17	100%
CES	Terekeka	HealthNetTPO	20	20	100%	20	100%
Lakes	Wulu	Doctors with Africa (CUAMM)	14	11	79%	14	100%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	2	13%	15	100%
CES	Juba	HLSS	46	45	98%	45	98%
NBGZ	Aweil West	HealthNetTPO	37	33	89%	35	95%
CES	Yei	SSUHA	17	15	88%	16	94%
NBGZ	Aweil East	IRC,TADO	36	34	94%	34	94%
NBGZ	Aweil North	HealthNetTPO,IHO	33	30	91%	30	91%
WBGZ	Wau	Cordaid	28	22	79%	25	89%
WBGZ	Jur River	Cordaid	35	10	29%	31	89%
WBGZ	Raja	HealthNetTPO	14	1	7%	12	86%
CES	Lainya	SSUHA	16	13	81%	13	81%
CES	Morobo	SSUHA,THESO	5	4	80%	4	80%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	0	0%	0	0%

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	Koch	CRADA,IRC	5	5	100%	5	100%
Unity	Panyijjar	IRC	15	15	100%	15	100%
Unity	Mayom	CASS	9	9	100%	9	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	Mayendit	CASS	12	11	92%	11	92%
Unity	Pariang	CARE International	11	9	82%	9	82%
Unity	Rubkona	Cordaid,IRC,IOM,MSF	15	12	80%	12	80%
Unity	Leer	UNIDOR	11	6	55%	7	64%
Unity	Guit	CHADO	7	0	0%	0	0%

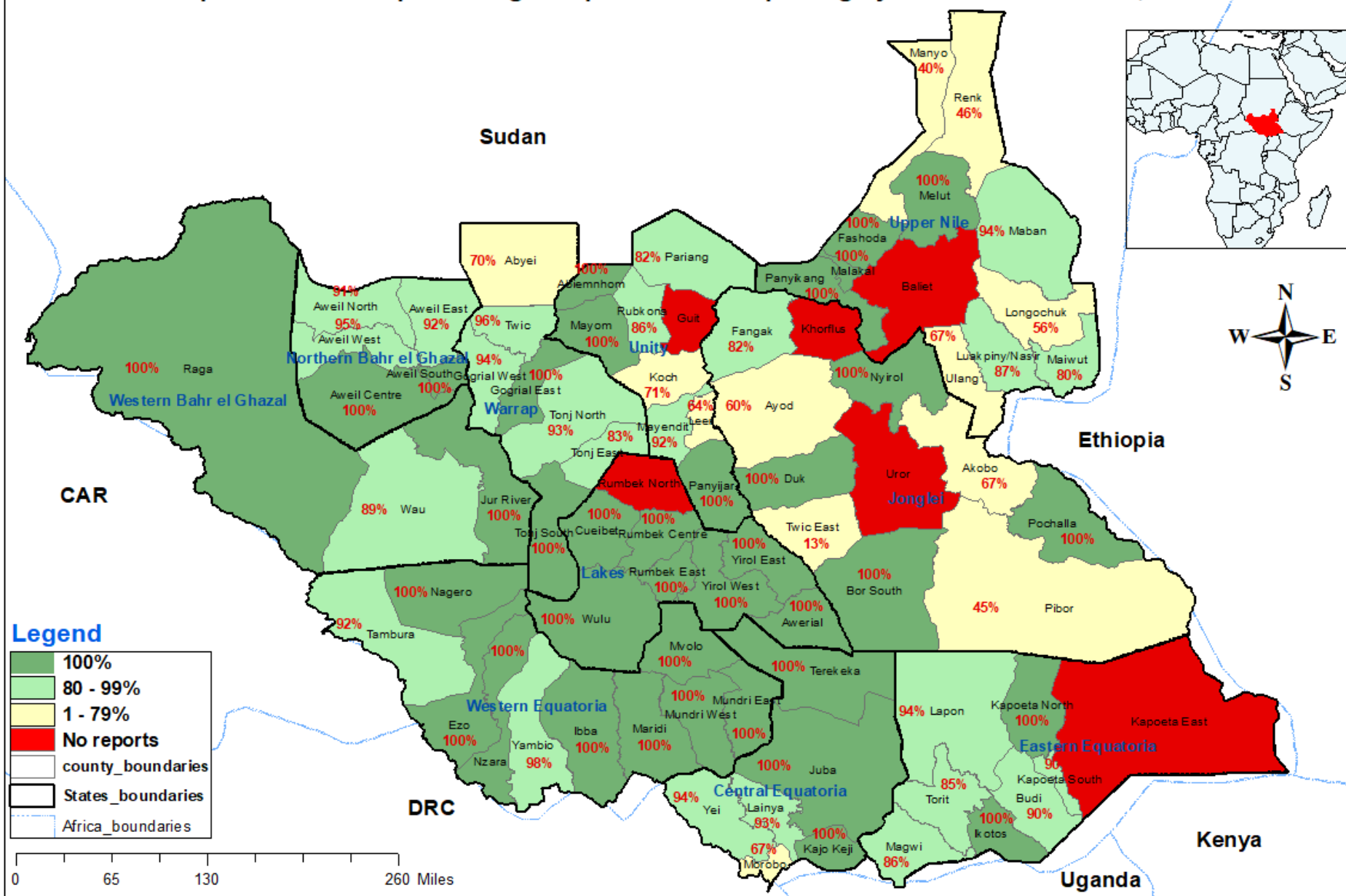
# IDSR timeliness & completeness performance at county level for week 47 of 2020 (2)



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
Jonglei	Nyiroi	CMA,Malaria Consortium	10	10	100%	10	100%
Jonglei	Pochalla	LIVEWELL	7	7	100%	7	100%
EES	Ikotos	HLSS	27	26	96%	27	100%
EES	Lopa Lafon	HLSS	18	14	78%	17	94%
EES	Kapoeta North	CCM	16	0	0%	15	94%
EES	Kapoeta South	CCM	10	9	90%	9	90%
Jonglei	Fangak	CMD,HFO	16	14	88%	14	88%
EES	Budi	Cordaid	21	17	81%	18	86%
EES	Torit	Cordaid	20	10	50%	17	85%
EES	Magwi	HLSS	22	18	82%	18	82%
Jonglei	Pibor	LIVEWELL,CRADA	5	4	80%	4	80%
Jonglei	Duk	MDM + JDF	15	11	73%	11	73%
Jonglei	Bor	MDM + JDF	35	21	60%	21	60%
Jonglei	Ayod	CMD,EDA	15	8	53%	8	53%
Jonglei	Akobo	NILE HOPE	8	2	25%	2	25%
Jonglei	Twic East	MDM + JDF	11	1	9%	1	9%
Jonglei	Canal Pigi	IMC	11	0	0%	0	0%
Jonglei	Uror	Nile Hope,Malaria Consortium	8	0	0%	0	0%
EES	Kapoeta East	CCM	12	0	0%	0	0%

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
Warrap	Gogrial East	GOAL	15	15	100%	15	100%
Warrap	Tonj South	CCM	12	12	100%	12	100%
Upper Nile	Melut	WVI + RI	8	8	100%	8	100%
Upper Nile	Panyikang	IMC	4	4	100%	4	100%
Upper Nile	Fashoda	CORDAID	13	9	69%	13	100%
Warrap	Gogrial West	GOAL	31	29	94%	29	94%
Upper Nile	Maban	WVI,RI,Samaritans Purse	17	14	82%	16	94%
Warrap	Tonj North	CCM	14	13	93%	13	93%
Warrap	Twic	GOAL	26	24	92%	24	92%
Upper Nile	Luakpiny Nasir	UNKEA,RI	15	13	87%	13	87%
Upper Nile	Makal	IMC	7	6	86%	6	86%
Warrap	Tonj East	CCM	12	10	83%	10	83%
Upper Nile	Maiwut	RI	5	4	80%	4	80%
Upper Nile	Akoka	IMC	5	4	80%	4	80%
Warrap	Abyei	AAA,Save the Children,MSF	10	7	70%	7	70%
Upper Nile	Longechuk	RI	9	5	56%	5	56%
Upper Nile	Renk	WVI + RI	13	6	46%	6	46%
Upper Nile	Ulang	UNKEA,RI	14	6	43%	6	43%
Upper Nile	Manyo	CORDAID	10	4	40%	4	40%
Upper Nile	Ballet	IMC	4	0	0%	0	0%

**IDSR performance Map showing completeness of reporting by counties in week 47, 2020.**



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 performance indicator by partner for week 47 of 2020

Partner	HF's	Reporting		Performance	
PARTER	# OF SITES	# of reports received on Time	No. of HF's Reported regardless of time	Timeliness	Completeness
IRC	1	1	1	100%	100%
HAA	2	2	2	100%	100%
RHS	1	1	1	100%	100%
GOAL	2	2	2	100%	100%
TRI-SS	2	2	2	100%	100%
IMC	6	6	6	100%	100%
Medicair	2	2	2	100%	100%
MSF-E	6	6	6	100%	100%
UNH	2	2	2	100%	100%
IOM	12	10	10	83%	83%
HFD	6	5	5	83%	83%
MSF-H	5	2	3	40%	60%
UNIDOR	2	1	1	50%	50%
HFO	2	1	1	50%	50%
CMD	1	0	0	0%	0%
Medair	2	0	0	0%	0%
World Relief	2	0	0	0%	0%
TOTAL	56	43	44	77%	79%

**Completeness was 79 and timeliness was 77% for weekly reporting in week 47, 2020 for partner-supported clinics serving IDP sites.**



# EVENT-BASED SURVEILLANCE



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





State	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	AFP	Bloody Diarrhoea	Malaria (Confirmed)	Measles	Neonatal Tetanus	Guinea Worm	Viral Hemorrhagic Fever	Covid-19	Total alerts
CES	4	5		1	2						12
EES		3		5	1						9
Jonglei	8	3		4	4					1	20
Lakes	3	4					1				8
Unity									1	1	2
Upper Nile	7	3		4	5						19
Warrap		2	1	6	3					1	13
WBGZ	1	4		2	1			1			9
WES	1	6		3	18	1				1	30
<b>Total alerts</b>	<b>24</b>	<b>30</b>	<b>1</b>	<b>25</b>	<b>34</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>122</b>

**During this week:**

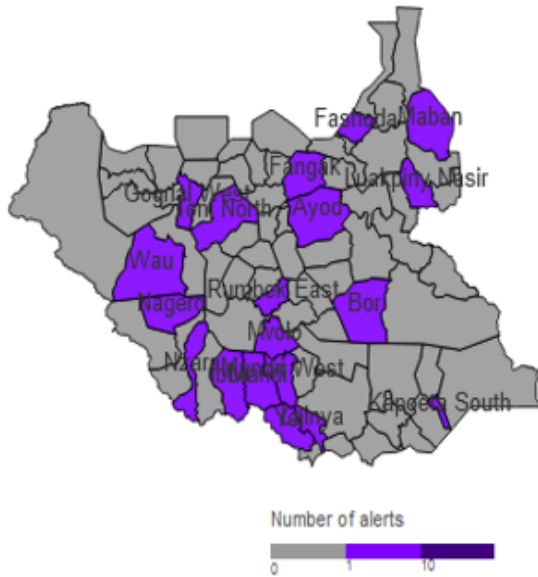
- 24 ARI alert: 5 under verification and 19 are investigated
- 30 AWD alert: 11 are undergoing verification and 19 are investigated
- 25 ABD alert: 10 under going Investigation and 15 are investigated
- 34 Malaria alerts: 5 are under verification and 29 are investigated
- 4 Covid-19 alert: all are investigated
- 1 Measles alert: investigated
- 1 AFP alert: investigated
- 1 Neonatal Tetanus alert: under investigation
- 1 Guinea Worm alert: under investigation
- 1 VHF alert: under investigation with sample tested negative



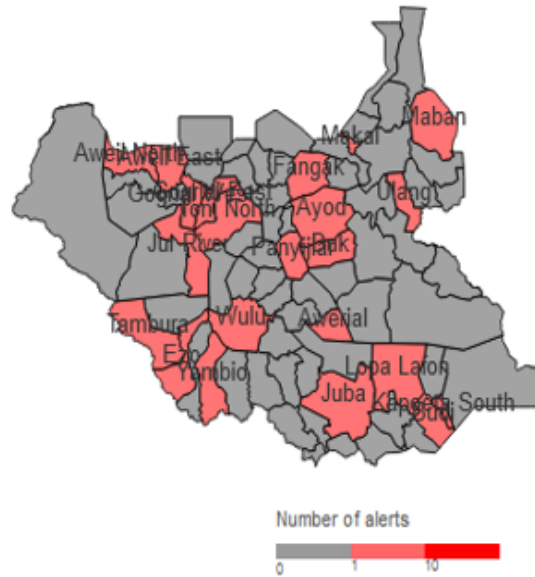
# Alert: Map of key disease alerts by county of week 47 of 2020



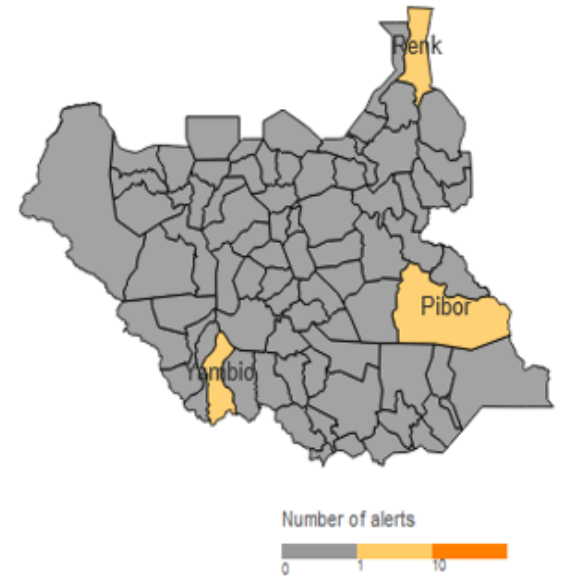
Map 2a | Malaria (W47 2020)



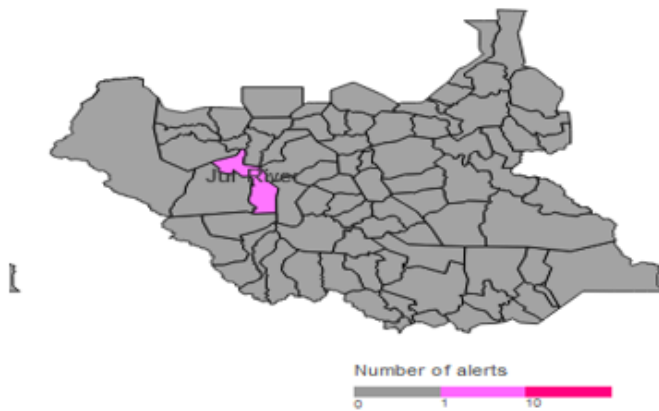
Map 2b | Bloody diarrhoea (W47 2020)



Map 2c | Measles (W47 2020)



Map 2e | Guinea Worm (W47 2020)



W47	Cumulative (2020)	
0	13	Low risk
4	4	Medium risk
0	27	High risk
0	58	Very high risk

78%	80%	% verified
0%	0%	% auto-discarded
0%	1%	% risk assessed
0%	1%	% requiring a response

# Alert 1: Suspected Cholera Alert from Akobo, Jonglei State

- A cholera alert was reported on 23rd November 2020 from Akobo County Hospital
- The suspected case tested negative for (*V. cholerae*) on Rapid Diagnostic Test.
- The suspected case was later diagnosed with typhoid fever and was put on antibiotics therapy and later discharged. No sample was collected to be shipped to the National Public Health Laboratory.
- A WHO National Public Health Officer will be deployed to Akobo to support the CHD conduct further investigations.

## Alert 2: Suspected VHF in LEER County, Unity State

- On 16<sup>th</sup> and 17<sup>th</sup> November 2020, the MSF hospital in Leer admitted two children both 11 years and one Adult, all suspects presented with nasal bleeding and vomiting blood. One of the Children later died on the 17<sup>th</sup> of November 2020
- Three blood samples were collected and shipped to National Public Health Lab in Juba. Upon analysis in Juba, all samples tested negative for EVD, Rift Valley Fever, Yellow Fever and Chikungunya Viral Haemorrhagic Fever
- Nevertheless All 3 samples were shipped to Uganda Virus Research Institute (UVRI) for further analysis, updates will be shared.

## Alert 3: Birds Dying in Yirol West County, Lakes State

- On 19 Oct 2020, bird die-offs were reported in Yirol West County. An investigation was carried out and samples were collected by FAO and Ministry of Animal Resources and Livestock (MAR&L) and were analyzed in MAR&L Laboratory in Juba.
- Six samples tested positive for Rift Valley Fever (RVF) IgM.
- There are no cases of cattle deaths reported and all the samples were shipped to an OIE international collaborating laboratory for further analysis
- Lakes State MoH and WHO working with animal health counter parts have:
  1. Initiated review, updating and activation of the existing outbreak preparedness plan working with the technical officers animal health (Ministry of livestock and FAO)
  2. Enhanced human and animal surveillance through sensitization of surveillance focal points and availing case definitions
  3. Community engagement to prevent human exposures to diseased animals and birds
  4. Ample supplies for respiratory sample and blood sample collection kits; and specimen shipment materials to support investigation of suspect cases.

## Alert 4: Acute watery diarrhoea cases in IDP camp, Mangalla, CES

- In week 47, 2020 an NGO reported increase number of Acute Watery Diarrhea (AWD) among IDPs in Mangalla
- State RRT was activated and deployed on 20 Nov 2020 to conduct epidemiological investigations.
- There was one patient in the isolation ward, sample was collected, and culture growth was suggestive of *Aeromonas* species and no *V. Cholerae* was isolated
- WHO office in Central Equatoria will be conducting one day assessment in the area on 30 November 2020 to further assess the current health situation among the IDPs

# SUSPECTED OUTBREAKS



Major suspected outbreaks in South Sudan in  
2020







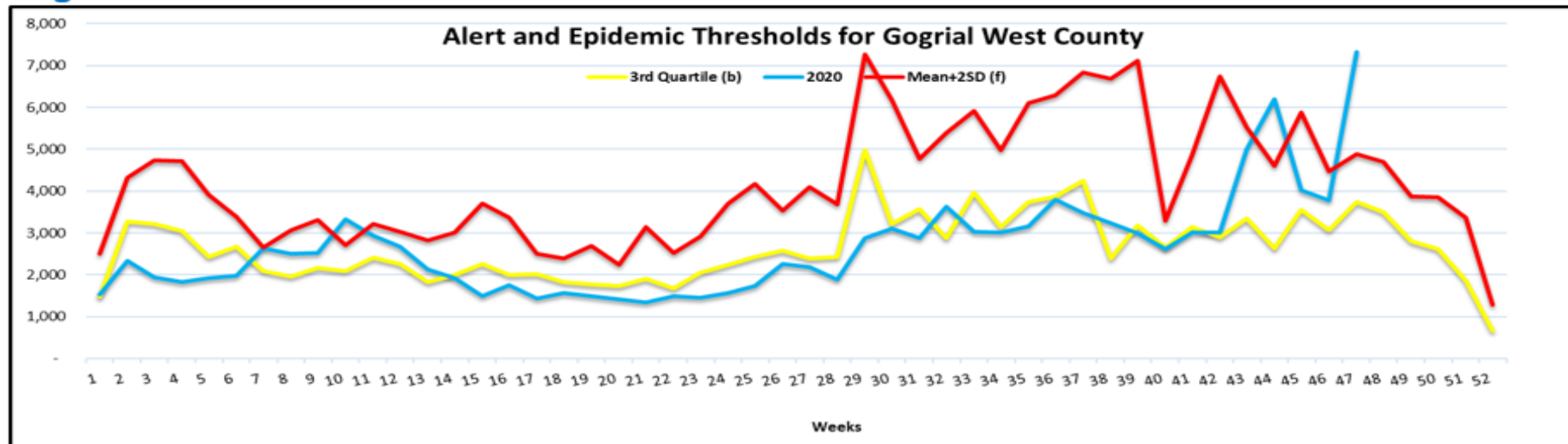
Malaria was the leading cause of morbidity and mortality, accounting for **62.9%** of all morbidities and **11.7%** of all mortalities this week.

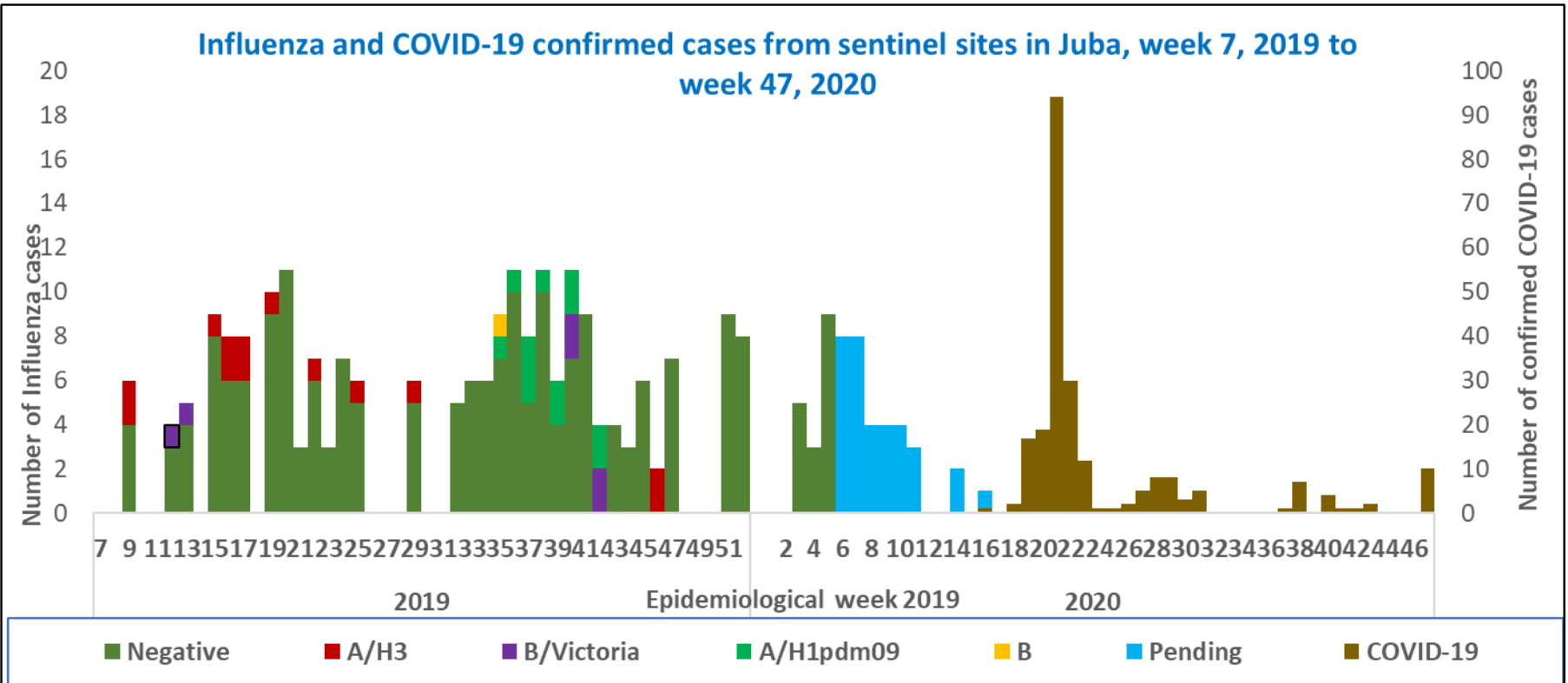
There were **7 Counties** with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

1. Kuajok (Gogrial West, Tonj North)
2. Juba hub (Juba)
3. Aweil hub (Aweil East, Aweil North)
4. Bentiu hub (Rubkona)
5. Wau hub (Wau)

In the PoC sites; malaria is the top cause of morbidity in Bentiu (47%); Juba (64%), Bor (0%) and Wau (33%) PoCs, in Malakal PoC malaria accounts for (6%) of OPD consultations, respectively.

## Gogrial West





- In week 7, 2019, South Sudan started case-based surveillance for Influenza Like Illness (ILI) and Severe Acute Respiratory Infection (SARI) cases through systematic collection of epidemiological and virological information.
- In 2019, a total of 309 ILI/SARI samples have been collected and tested in UVRI 228 being negative; 6 positive for Influenza B (Victoria); 13 positive for Influenza A (H3); and 12 positive for Influenza A (H1)pdm09 and (50) samples are pending test results .
- There are currently 20 Covid-19 designated sentinel surveillance sites in Juba that are collecting epidemiological data and samples from ILI/SARI cases. A total of 4002 samples have been collected in 2020 with 232 (5.7%) being positive for COVID-19 in Juba. These sentinel samples have not been tested for influenza in 2020

# ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS



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



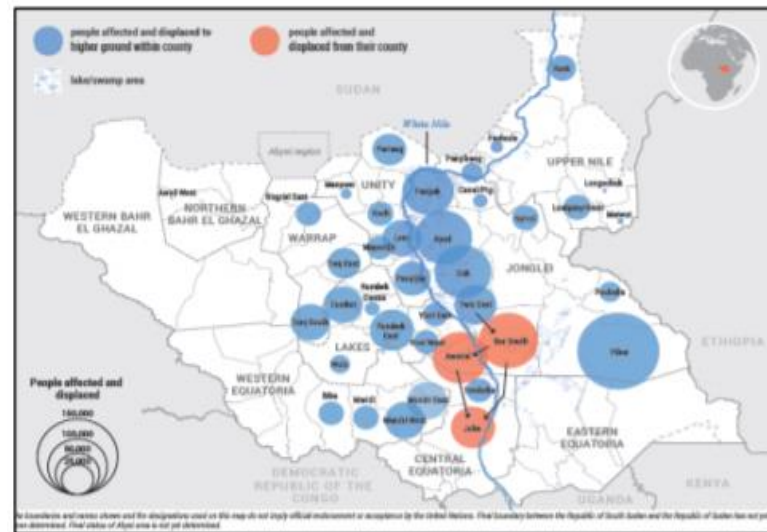


## Flooding, South Sudan, week 47, 2020

- Over one million (**1,034,00**) people have been affected by flooding in eight out of 10 states in South Sudan. Abnormally heavy rainfall from July to date has led to overflowing of the rivers Nile, Pibor, Sobat, Lol and other rivers as well as inland flooding. Jonglei (over **400,000** people), the Greater Pibor Administrative Area (over **125,000** people) and Lakes area (147,000 people) are the most affected locations in the country.
- Out of the over one million people affected by floods in **43** counties, **481,00** people have been displaced from their usual residence.

### Health Cluster Response:

- Health response measures for over **600,000** people are ongoing despite the challenge of access and resource constraints. The number of people reached, currently is estimated at **56 754 (10%)** people
- Health cluster partners are responding through both mobile clinics and static facilities where they are attending to increasing cases of malaria and acute watery diarrhea. Health education on the prevention of malaria and water-borne diseases, hygiene and sanitation and prevention of COVID-19 are being offered in the flood affected locations



Preparations are underway to conduct OCV campaigns in Bor and Pibor counties of Jonglei state.

WHO has secured **\$1.2 million** from CERF for procurement of emergency health kits and other supplies to support partners responding in floods-affected locations. WHO mobile teams are conducting outreaches in floods-affected



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
<b>Ongoing epidemics</b>								
Hepatitis E	Bentiu PoC	03/01/2018	1	412 (0.003)	Yes	No	Yes	Yes
Measles	Bentiu PoC	24/04/2019	NR	482 (0.006)	Yes	Yes	Yes	N/A
Measles	Pibor	27/1/2020	1	355 (0.0028)	Yes	Yes	Yes	N/A
Measles	Ibba	25/1/2020	0	40 (0.345)	Yes	Yes	Yes	N/A





- Measles outbreaks confirmed in 2020

- 8 counties – Tonj East, Magwi, Bor, Kapoeta East, Tonj South, Wau and Pibor

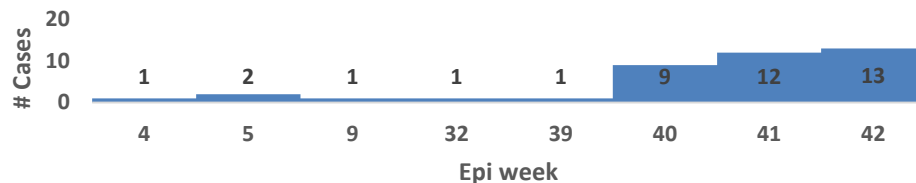
- Locations with ongoing measles transmission

- Pibor County
    - Wau County
    - Ibba County

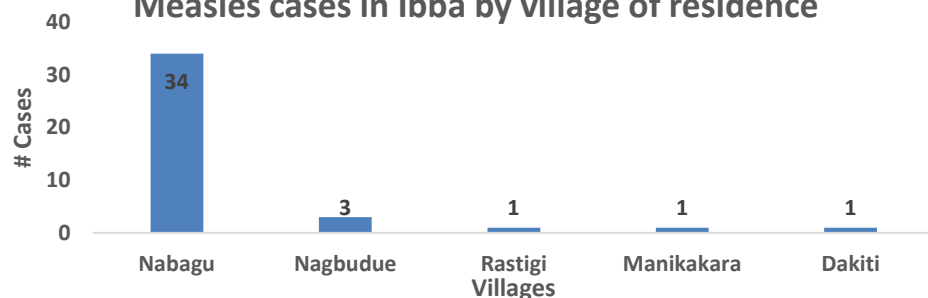


## Confirmed Measles Outbreak in Ibba

Measles Cases in Ibba from week 4 to week 42 of 2020



Measles cases in Ibba by village of residence



### Background and descriptive epidemiology

- Measles transmission has persisted in Ibba county despite of the mass vaccination, and the follow up campaign was completed for the two counties – the coverage was 99%
- Suspected measles cases were reported, and two samples tested measles IgM +e.
- 13 cases were reported in week 42, makes a total of 40 cases since beginning of 2020
- 30% of the cases are less than 5 years of age
- 40% are female and 60% male
- Most affected areas are Nabagu and Nagbudue
- Measles follow up campaign, achieved 99% early 2020

### Response Actions:

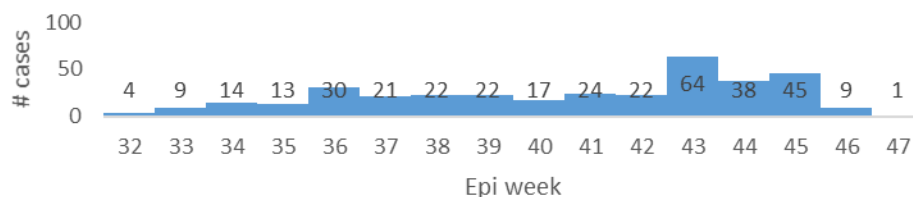
- An assessment mission recommended the need to strengthen routine immunization
- The implementing NGOs, (Action Africa help (AAH) responded through enhanced routine vaccination outreaches to the affected and at-risk villages
- No new cases have been reported from the areas

Age group	Cases	Percentage	CUM. %
0 - 4 Years	12	30%	30%
5 - 9 Years	11	28%	58%
10 - 14 Years	9	23%	80%
15 + Years	8	20%	100%
Grand Total	40	100%	



## Confirmed Measles Outbreak in Pibor

Epi curve for measles cases in Pibor from week 32 to week 47, 2020.



Measles cases in Pibor county by location from week 32 to week 47, 2020.



### Background and descriptive epidemiology

- Measles transmission has persisted in Pibor county despite of the vaccination campaign conducted in February and March and October 2019
- Suspected measles cases were reported from Pibor; five sample were send to Juba and tested measles IgM +e.
- 1 case were reported in week 47, makes a total of 355 since beginning of 2020
- 88% of the cases are less than 5 years of age
- 50% are female and 50% male
- Most affected areas are Lekuangle

### Response Actions:

- Reactive campaign ongoing, started on 11 Nov 2020
- Pibor and verteth done, ongoing in Lekuangle and Gumuruk
- Mop up to be considered based on the administrative coverage data
- Some villages were not reached, requires to be revisited once reachable
- Some locations (Gumuruk and Lekuangle) are being accessed from Juba

Age group	Cases	Percentage	CUM. %
1 - 4 Years	314	88%	88%
10 - 14 Years	6	2%	90%
15 + Years	2	1%	91%
5 - 9 Years	33	9%	100%
Grand Total	355	100%	



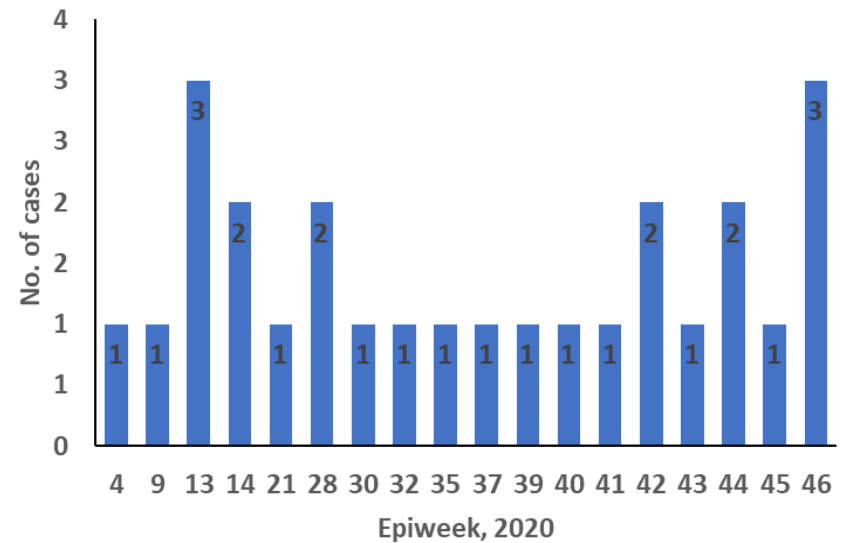


# Suspected HEV Outbreak in Abyei

## Background and descriptive epidemiology

- On 16th November 2020, the Abyei AA MoH reported increasing cases of suspect Hepatitis E virus (HEV).
- A total of 26 suspect cases have been line listed from week 3 to week 45, 2020.
- Warrap State RRT and WHO Kwajok hub were deployed to Agok on Sunday (22nd November) to conduct further epidemiological investigations and together with partners on ground conduct WASH assessments
- *Age distribution*: 1/26 (3.85%) are <5 yrs of age
- **Gender**: 18/26 (69%) are male and 8/26 (31%) were female
- **Outcome**: 2 deaths (24 & 32 years) CFR 7.6%
- **Affected areas**: Most affected location is Rumammer has 15/26 (58%) cases, other locations are Turalei, Abienmhom, Abyie

Epicurve of suspected HEV cases in Abyei, 2020

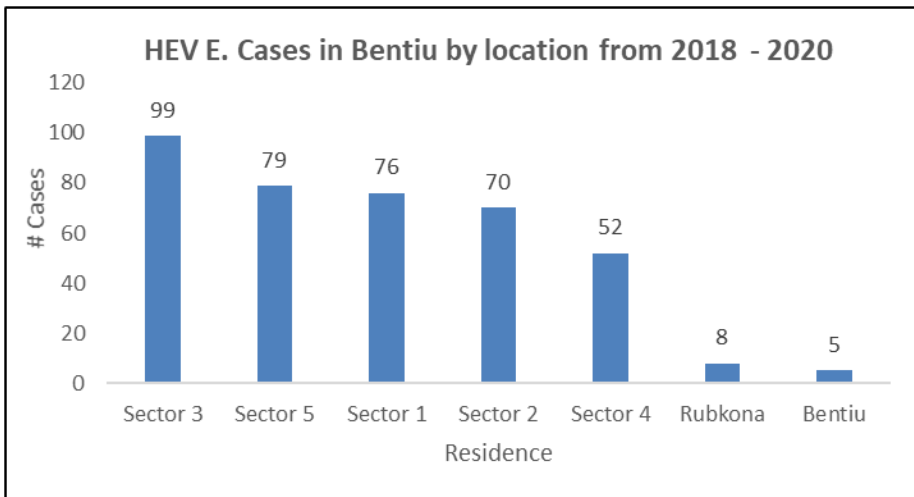
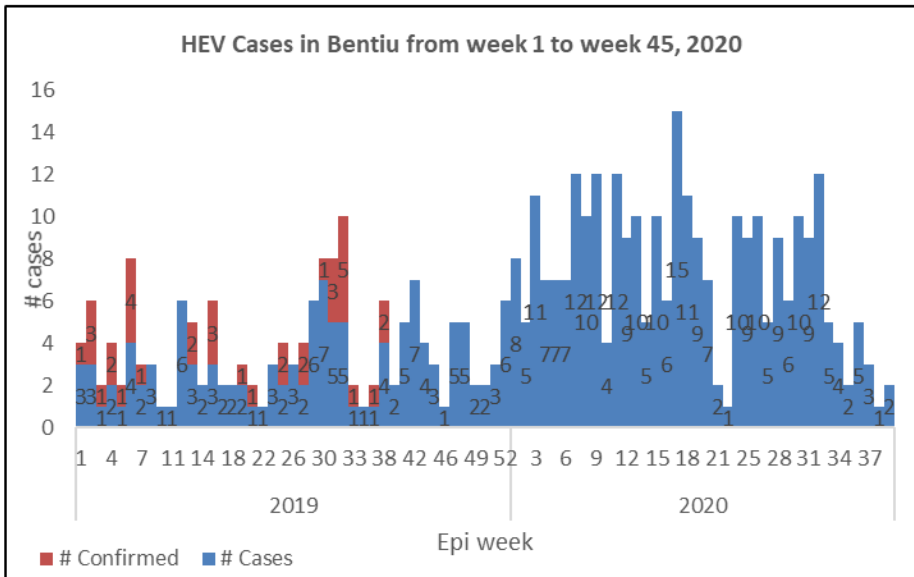


## Response

- Outbreak investigation-epidemiological and environmental investigation are currently underway
- Local WASH cluster partners engaged to initiate environmental assessments and emergency WASH interventions



# Hepatitis E, Bentiu PoC (1)



### Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 412 cases since beginning of 2019
- There were (13) new cases reported in week 47, 2020
- All the cases were managed as outpatient cases except for seven cases who were admitted
- 5 deaths reported in 2019 and 2020
- 49% are female and 51% 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 45, 2020; there were 412 cases of HEV in Bentiu PoC including 5 deaths (CFR 0.01%)

Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	128		128	31%	0%	31%
10 - 14 Years	64		64	16%	0%	47%
15+ Years	101	3	104	25%	3%	72%
5 - 9 Years	114	2	116	28%	2%	100%
<b>Grand Total</b>	<b>407</b>	<b>5</b>	<b>412</b>	<b>100%</b>	<b>0.01</b>	



## 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 Jerry cans 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



## OPV Vaccination Updates in WES

- The OPV campaign began on 12/11/2020 and ended on 15/11/2020.
- Six counties had been targeted for SNIDs (Yambio, Nzara, Ezo, Mvolo, Tombra and Nagero).
- Total Target population is 136,597 children, age group from 0 to 59 months old.
- Call in Data for 4 days received so far is 26,954 vaccinated with OPV (more data are yet to be received)

## OPV Vaccination Campaign conducted in WBeGz

- The campaign started from 10th – 13th Nov 2020) targeting (118,575) child under 5 in the whole state
- The preliminary data received as a coverage is (69,346) an equivalent to 59.2%,coverage., more data are still coming in from the fields

### Challenges:

- Poor coverage reported from some areas due to shortage of vaccination team
- Inaccessibility to some areas due to bad roads /flooded roads (Raja-SiraMulaga)
- Supportive supervision for the campaign did not take place in some areas in Jur River county due to insecurity
- Marker pens delivered to the state for the campaign are dry which are not leaving behind a mark on the fingers

## **Background:**

Since July floods have devastated most parts of Jonglei state with Bor and Pibor being the most affected reporting respectively 74,846 people and 125,000 people displaced and congested into limited high ground IDP locations with inadequate access to safe water and sanitation and at high risk for waterborne diseases like cholera. To avert the risk of a cholera outbreak, oral cholera vaccine campaigns were recommended following a cholera risk assessment.

## **Proposed response**

1. Preparations are underway to conduct an OCV campaigns in both Bor and Pibor counties of Jonglei state.
2. The OCV campaign in Pibor will target 99,838 individuals aged one year and above.
3. In Bor County the OCV campaign will target 72,825 individuals aged one year and above.
4. The OCV campaigns are part of outbreak prevention activities in flood-affected Counties.



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
<b>Controlled epidemics</b>								
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
Measles	Aweil East	29/12/2019	NR	664 (0.127)	Yes		No	Yes



# EBOLA VIRUS DISEASE[EVD] PREPAREDNESS IN SOUTH SUDAN



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



# COVID-19 Updates



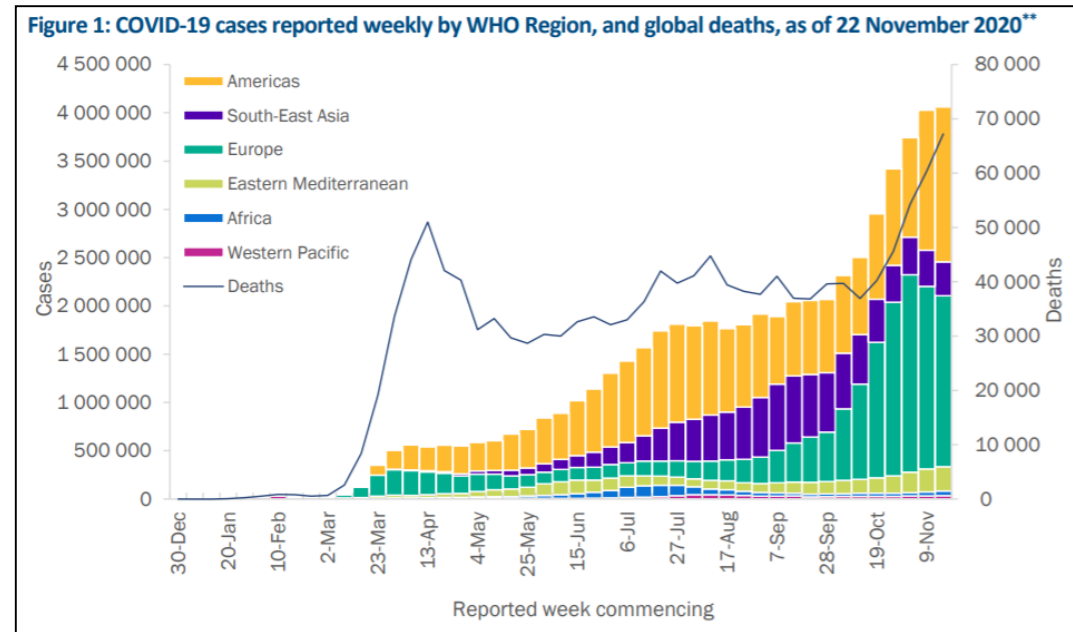


# COVID-19 Virus Situation Summary



Situation update as of 22<sup>nd</sup> November 2020

- The COVID-19 pandemic initial cases were detected in Wuhan China
- Globally >57.8 million cases (> 1.3 million deaths)
- Africa > 1 446 041 million cases (>32 538 deaths)



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



- 3,064 confirmed COVID-19 cases in South Sudan; 85% in Juba with 60 deaths and a case fatality rate (CFR) of 2.0%. Total 9,347 contacts identified, quarantined, & undergoing follow up
- Implementation of priorities; risk communication and community engagement; active case search and testing; quarantine for contacts; isolation of confirmed cases, infection prevention and control; and management of cases are currently underway
- The overall response currently led by the COVID-19 National level taskforce, Medical Advisory Panel and the COVID-19 National Steering Committee



# Overall Conclusions and Recommendations



## Conclusion

- The overall IDSR and EWARN reporting performance in week 47, is above the target of 80%. (8) states were above 80%
- 3,064 confirmed COVID-19 cases in South Sudan; 85% in Juba with 60 deaths (CFR of 2.0%). Total 9,347 contacts identified, quarantined, & undergoing follow up
- A total of 1,546 COVID-19 alerts have been investigated with 1,356 (87.7%) being verified
- With eight outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- There are ongoing measles outbreak in Bentiu PoC and Pibor, Ibba and Wau county
- Given the COVID-19 pandemic, it is critical that measures are stepped up to contain its spread.



## Recommendations

- All partners should support CHDs & State Ministries of Health to undertake IDSR/EWARN reporting
- All health facilities should report, and conduct case-based investigation of suspect measles cases and routine measles immunization should be strengthened in all counties
- 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

For more help and support, please contact:

### Dr. John Rumunu

Director General Preventive Health Services  
Ministry of Health  
Republic of South Sudan  
Telephone: +211924767490

### Mr. Angelo Majak Goup

A/Director, Emergency Preparedness and Response  
Ministry of Health, RSS  
Tell: +211929830530  
Emails: tut1988@yahoo.com,  
greensouth2020@gmail.com  
Skype: mathew19885

### IDSR Bulletin Editorial Team

- 1.Mr. Ajak Ater, MoH - Email: ajakater014@gmail.com
- 2.Ms. Sheila Baya, WHO- Email: bayas@who.int
- 3.Mr. Robert Lasu Martin, WHO -Email: lasur@who.int
- 4.Mrs. Rose Dagama , WHO - Email: dagamaa@who.int
- 5.Dr. Abraham Adut, WHO- Email: abenegoa@who.int
- 6.Dr. Alice Igale Lado, WHO - Email: ladua@who.int
- 7.Dr. Joseph Wamala, WHO - Email: wamalaj@who.int
- 8.Dr. Argata Guracha Guyo, WHO - Email: guyo@who.int

## Notes

WHO and the Ministry of Health gratefully acknowledge the surveillance officers [at state, county, and health facility levels], health cluster and health pooled fund (HPF) partners who have reported the data used in this bulletin. We would also like to thank ECHO and USAID for providing financial support.

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>

