

South Sudan

Integrated Disease surveillance and response (IDSR)

Epidemiological Bulletin Week 1, 2021 (January 4- January 10)





- In week 1, 2021 IDSR reporting completeness was 87% and timeliness was 66% at health facility level. EWARN reporting completeness was 88% and timeliness was 66%
- Of the 129 alerts in week 1, 2021; 66% were verified 0% were risk assessed and 0% required a response. Malaria (49), AWD (52), ARI (9), measles (1) and bloody diarrhea (15) were the most frequent alerts in week 1, 2021
- Malaria remains the top cause of morbidity and accounted for 37,765 cases (53.6% of OPD cases)
- A total of 1,758 COVID-19 alerts have been investigated with 1,653 (94.0%) being verified. Total of 3,662 COVID-19 confirmed cases and 63 deaths, CFR of 2.0%
- Other hazards include floods in over 47 counties; measles in Ibba; 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 1 of 2021



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	Lakes	Doctors with Africa (CUAMM), LIVEWELL	117	69	59%	117	100%
2nd	WES	AMREF, World Vision, CUAMM, CDTY, OPEN	213	167	78%	212	100%
3rd	WBGZ	Cordaid, Healthnet TPO, CARE International, IOM	75	61	81%	74	99%
4th	CES	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO	119	108	91%	114	96%
5th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	131	112	85%	123	94%
6th	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	119	70	59%	111	93%
7th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS,IOM	88	59	67%	81	92%
8th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	109	50	46%	84	77%
9th	EES	Cordaid, HLSS, CCM	142	68	48%	101	71%
10th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID,Samaritans Purse,IOM	120	44	37%	60	50%
	South Sudan		1233	808	66%	1077	87%

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 66% and completeness was 87%. 9 states were above the target of 80% with highest reporting rate in Lakes & WES

IDSR timeliness & completeness performance at county level for week 1 of 2021 (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	Wulu	Doctors with Africa (CUAMM)	14	14	100%	14	100%
Lakes	Awerial	Doctors with Africa (CUAMM)	11	11	100%	11	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	15	100%	15	100%
WBGZ	Wau	Cordaid	28	28	100%	28	100%
CES	Terekeka	HealthNetTPO	20	20	100%	20	100%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	22	96%	23	100%
Lakes	Cueibet	Doctors with Africa (CUAMM)	15	14	93%	15	100%
CES	Yei	SSUHA	17	15	88%	17	100%
WBGZ	Jur River	Cordaid	35	29	83%	35	100%
NBGZ	Aweil East	IRC,TADO	36	28	78%	36	100%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	8	73%	11	100%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	0	0%	7	100%
Lakes	Yirol West	Doctors with Africa (CUAMM)	12	0	0%	12	100%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	0	0%	24	100%
CES	Juba	HLSS	46	41	89%	44	96%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	17	16	94%	16	94%
NBGZ	Aweil North	HealthNetTPO,IHO	33	30	91%	30	91%
NBGZ	Aweil West	HealthNetTPO	37	30	81%	33	89%
CES	Lainya	SSUHA	16	13	81%	13	81%
CES	Morobo	SSUHA,THESO	5	3	60%	4	80%
WBGZ	Raja	HealthNetTPO	14	4	29%	11	79%

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	Koch	CRADA,IRC.	5	5	100%	5	100%
Unity	Abiemnhom	Cordaid	4	4	100%	4	100%
Unity	Mayom	CASS	9	9	100%	9	100%
Unity	Mayendit	CASS	12	12	100%	12	100%
WES	Nagero	World Vision International	10	10	100%	10	100%
WES	Maridi	AMREF	26	26	100%	26	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	Nzara	World Vision International	20	18	90%	20	100%
Unity	Panyijiar	IRC	15	12	80%	15	100%
Unity	Leer	UNIDOR	11	6	55%	11	100%
WES	Ibba	AMREF	11	4	36%	11	100%
WES	Mundri West	CUAMM	21	0	0%	21	100%
WES	Yambio	World Vision International	42	34	81%	41	98%
WES	Tambura	World Vision International	28	18	64%	26	93%
Unity	Rubkona	Cordaid,IRC,IOM,MSF	15	11	73%	13	87%
Unity	Pariang	CARE International	11	0	0%	9	82%
Unity	Guit	CHADO	7	0	0%	2	29%

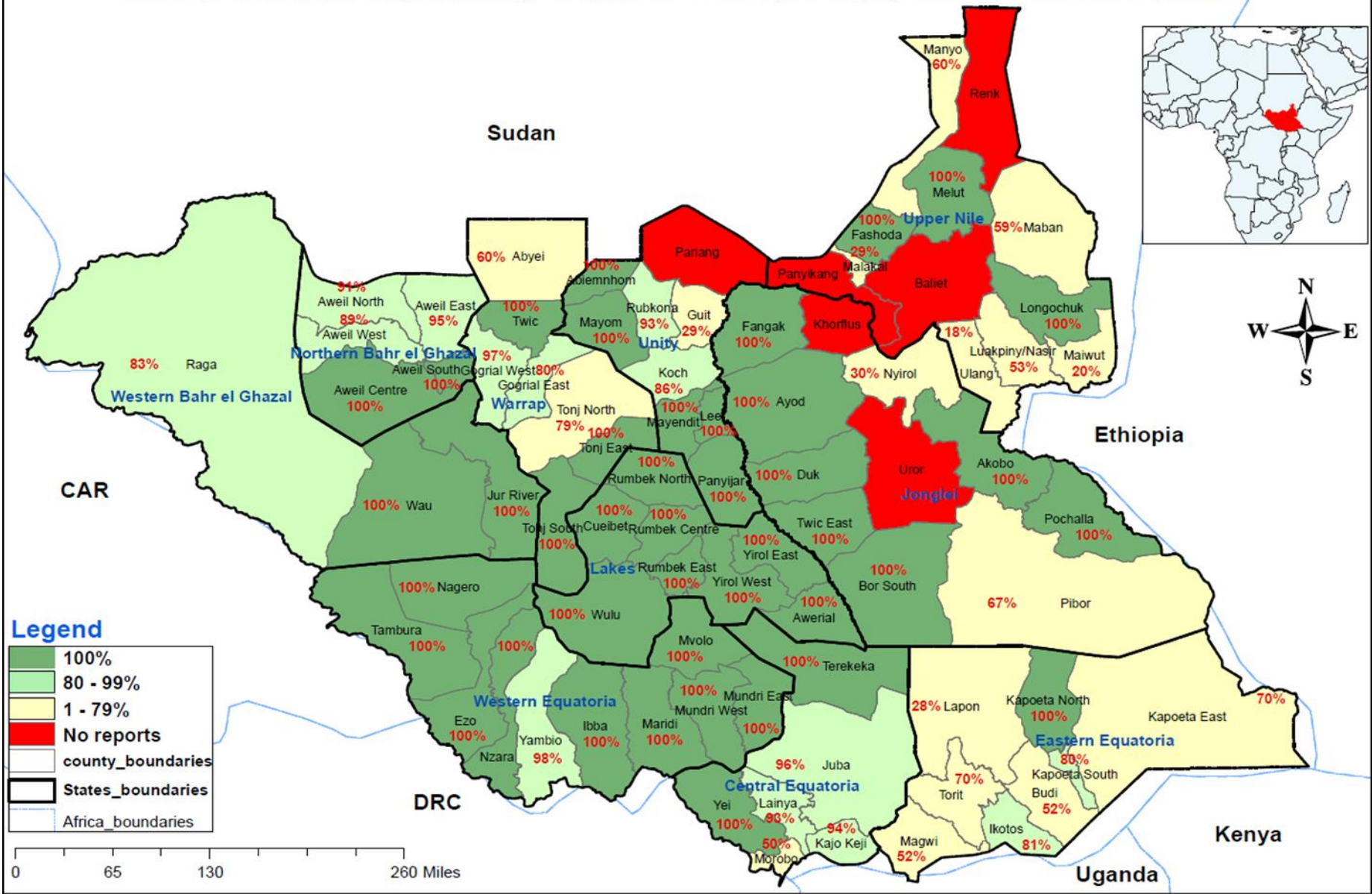
IDSR timeliness & completeness performance at county level for week 1 of 2021 (2)



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	Pochalla	LIVEWELL	7	7	100%	7	100%
Jonglei	Fangak	CMD,HFO	16	14	88%	16	100%
EES	Kapoeta North	CCM	16	9	56%	15	94%
EES	Ikotos	HLSS	27	16	59%	25	93%
EES	Kapoeta South	CCM	10	6	60%	8	80%
Jonglei	Ayod	CMD,EDA	15	1	7%	11	73%
Jonglei	Duk	MDM + JDF	15	0	0%	11	73%
Jonglei	Twic East	MDM + JDF	11	0	0%	8	73%
EES	Torit	Cordaid	20	14	70%	14	70%
EES	Magwi	HLSS	22	11	50%	14	64%
Jonglei	Bor	MDM + JDF	35	21	60%	21	60%
EES	Kapoeta East	CCM	12	4	33%	7	58%
EES	Budi	Cordaid	21	4	19%	11	52%
Jonglei	Nyiroi	CMA,Malaria Consortium	10	3	30%	5	50%
Jonglei	Pibor	LIVEWELL,CRADA	5	2	40%	2	40%
EES	Lopa Lafon	HLSS	18	4	22%	7	39%
Jonglei	Akobo	NILE HOPE	8	2	25%	3	38%
Jonglei	Canal Pigi	IMC	11	0	0%	0	0%
Jonglei	Uror	Nile Hope,Malaria Consortium	8	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
Upper Nile	Fashoda	CORDAID	13	13	100%	13	100%
Warrap	Tonj East	CCM	12	12	100%	12	100%
Warrap	Tonj South	CCM	12	12	100%	12	100%
Upper Nile	Melut	WVI + RI	8	0	0%	8	100%
Warrap	Gogrial West	GOAL	31	30	97%	30	97%
Warrap	Twic	GOAL	26	0	0%	25	96%
Warrap	Tonj North	CCM	14	11	79%	13	93%
Upper Nile	Longechuk	RI	9	8	89%	8	89%
Warrap	Gogrial East	GOAL	15	0	0%	13	87%
Warrap	Abyei	AAA,Save the Children,MSF	10	5	50%	6	60%
Upper Nile	Manyo	CORDAID	10	5	50%	6	60%
Upper Nile	Maban	WVI,RI,Samaritan's Purse	17	8	47%	10	59%
Upper Nile	Luakpiny Nasir	UNKEA,RI	15	7	47%	8	53%
Upper Nile	Uliang	UNKEA,RI	14	2	14%	4	29%
Upper Nile	Maiwut	RI	5	0	0%	1	20%
Upper Nile	Makal	IMC	7	1	14%	1	14%
Upper Nile	Baliet	IMC	4	0	0%	0	0%
Upper Nile	Renk	WVI + RI	13	0	0%	0	0%
Upper Nile	Panyikang	IMC	4	0	0%	0	0%
Upper Nile	Akoka	IMC	5	0	0%	0	0%

IDSR performance Map showing completeness of reporting by counties in week 01, 2021.



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 1 of 2021

Partner	HFs	Reporting		Performance	
		# of reports received on Time	No. of HFs Reported regardless of time	Timeliness	Completeness
IRC	1	1	1	100%	100%
IMC	6	6	6	100%	100%
Medicaire	2	2	2	100%	100%
UNH	2	2	2	100%	100%
World Relief	2	2	2	100%	100%
CMD	1	1	1	100%	100%
IOM	12	12	12	100%	100%
LiveWell	4	4	4	100%	100%
RHS	1	1	1	100%	100%
HAA	2	2	2	100%	100%
MSF-E	6	0	6	0%	100%
GOAL	2	0	2	0%	100%
UNIDOR	2	0	2	0%	100%
HFD	6	5	5	83%	83%
MSF-H	5	0	3	0%	60%
HFO	2	1	1	50%	50%
SSHCO	1	0	0	0%	0%
TRI-SS	2	0	0	0%	0%
TOTAL	59	39	52	66%	88%

Completeness was 88% and timeliness was 66% for weekly reporting in week 1, 2021 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	Measles	Covid-19	Total alerts
CES	1	5						6
EES		3	1	2				6
Unity	2	3		3	1		1	10
Upper Nile	1	2			3			6
Warrap		4		3	2			9
WBGZ	3	7		1	7			18
WES	2	28		6	36	2		74
Total alerts	9	52	1	15	49	2	1	129

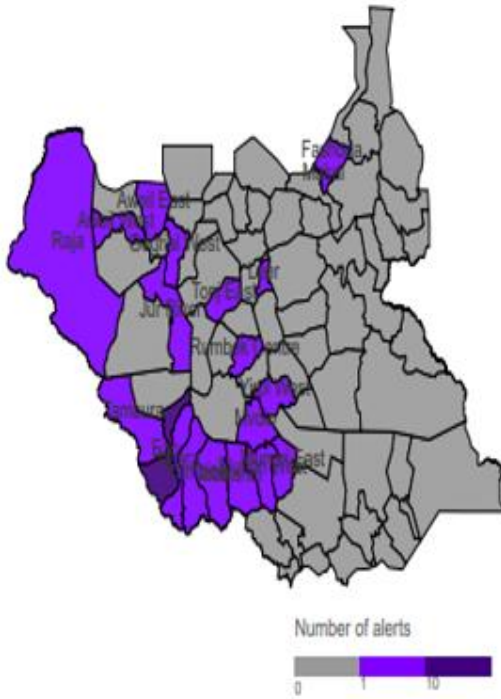
During this week:

- **9 ARI alert:** 1 from Upper Nile state sample collected and tested negative for Covid-19, 1 from CES sample collected and tested negative for Covid-19, 2 from WES samples collected and tested in Yambio hospital (both negative for Covid-19), 2 from Unity state samples collected and tested negative for Covid-19, 3 from WBG sample collected and tested negative for Covid-19 (All the ARI samples were tested at the state sentinel sites).
- **52 AWD alert:** 5 from CES, sample collected and tested with no growth of any pathogen, 3 from EES and sample not collected, 1 from Upper Nile sample collected, 2 from unity state sample collected and tested with no growth of any pathogen, 7 from WBG sample collected and tested and tested with no growth of any pathogen, 28 from WES sample collected and tested with no growth of any pathogen, 4 from Warrap sample not collected
- **15 ABD alert:** 2 from EES, 3 from Unity, 3 from Warrap, 1 from WBGZ and 6 from WES all did not collect samples.
- **49 Malaria alerts:**, 1 from Unity, 3 from Upper Nile, 2 from Warrap, 7 from WBG and 36 from WES and these are due to the high increase of malaria cases in the Country.
- **2 Measles alert:** All from WES and were investigated
- **1 AFP alert:** from EES states and is been investigated.
- **1 COVID-19 alert:** from unity state and investigation is done.

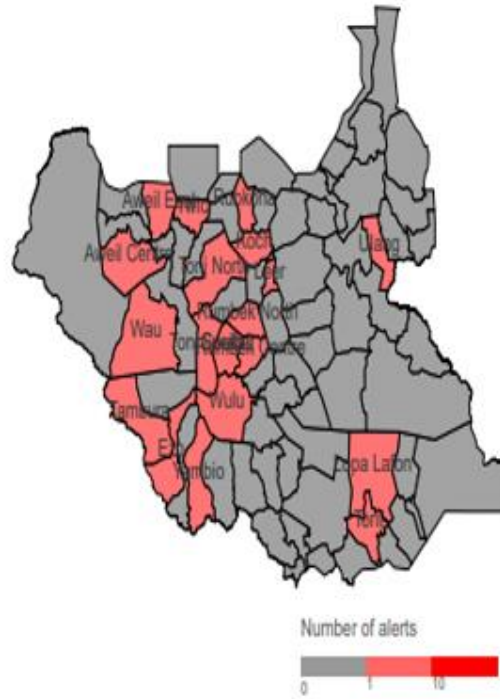
Alert: Map of key disease alerts by county of week 1 of 2021



Map 2a | Malaria (W1 2021)



Map 2b | Bloody diarrhoea (W1 2021)



Map 2c | Measles (W1 2021)



W1	Cumulative (2021)	
0	0	Low risk
0	0	Medium risk
1	4	High risk
0	2	Very high risk

66%	66%	% verified
0%	0%	% auto-discarded
0%	1%	% risk assessed
0%	0%	% requiring a response

Bacteriology lab updates 2021

S/N	Epi-week	County (no. of samples)	Specimen tested (n)	Sample type	Suspected disease	Lab Results	Comment
1	52	Bor South	1	stool	V. Cholerae	No Growth for all enteric pathogens	
2	52	Bor South	1	stool	V. Cholerae	No Growth for all enteric pathogens	
3	1	Juba	1	stool	V. Cholerae	Growth for E Coli	
4	1	Juba	1	stool	V. Cholerae	No Growth for V. Cholerae	
5	1	Ibba	1	stool	V. Cholerae	No Growth	
6	1	Rumbek East	1	CSF	Meningitis	No Growth	
7	1	Yambio	2	stool	V. Cholerae	Rejected	Samples reached the lab after 30 days of shipment without Ice
8	1	Nzara	1	stool	V. Cholerae	Rejected	
9	1	Sakure	1	stool	V. Cholerae	Rejected	
10	1	Aweil Centre	2	stool	Shigellosis	Rejected	Samples shipped without transport media
11	1	Aweil Centre	1	stool	Shigellosis	Growth of Shigella Spp	
12	2	Abyei (Agok)	1	stool	V. Cholerae	Growth for non V. Cholerae	

SUSPECTED OUTBREAKS



Major suspected outbreaks in South Sudan in
2020





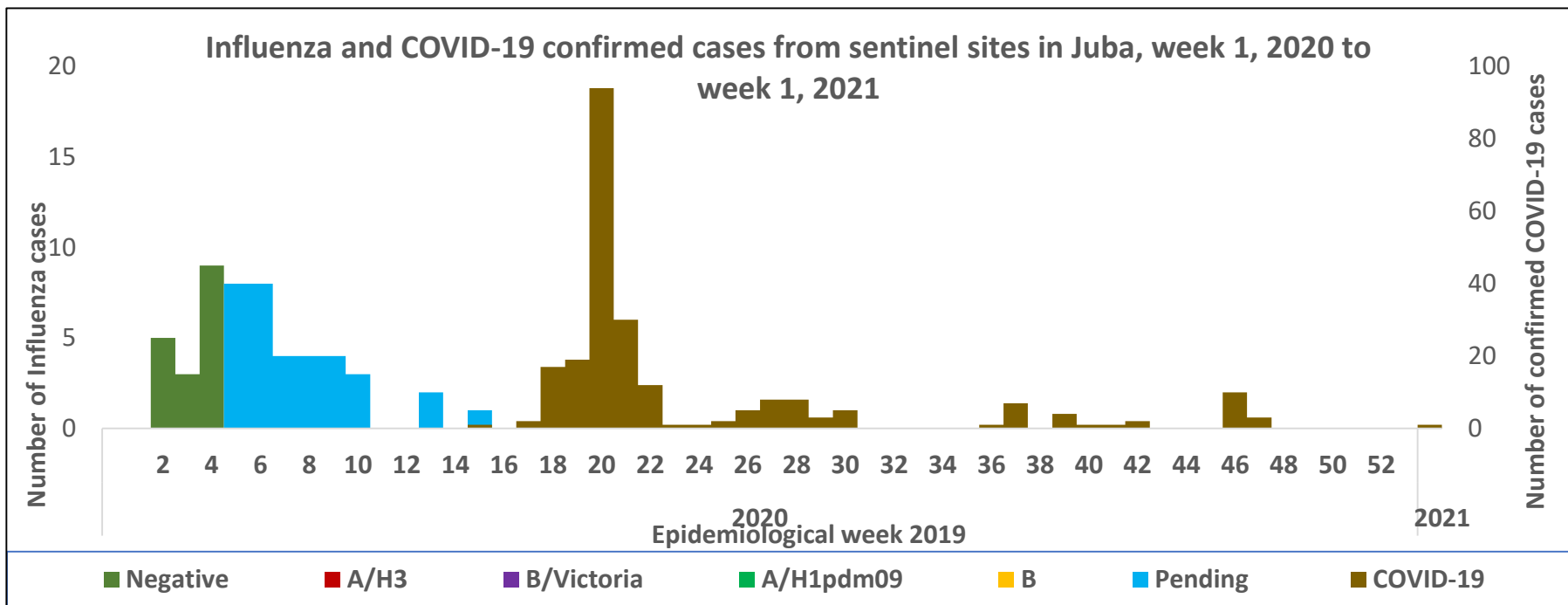
Malaria was the leading cause of morbidity and mortality, accounting for **53.7%** of all morbidities and **20.4%** of all mortalities this week.

There was **NO** county with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

□

In the PoC sites; malaria is the top cause of morbidity in Bentiu (**10%**); Juba (**64%**), and Wau (**13%**) PoCs, in Malakal PoC malaria accounts for (**12%**) of OPD consultations, respectively.





- 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 3 Covid-19 designated sentinel surveillance sites in Juba that are collecting epidemiological data and samples from ILI/SARI cases. A total of 4104 samples have been collected in 2021 with 234 (5.7%) being positive for COVID-19 in Juba. These sentinel samples have not been tested for influenza in 2020

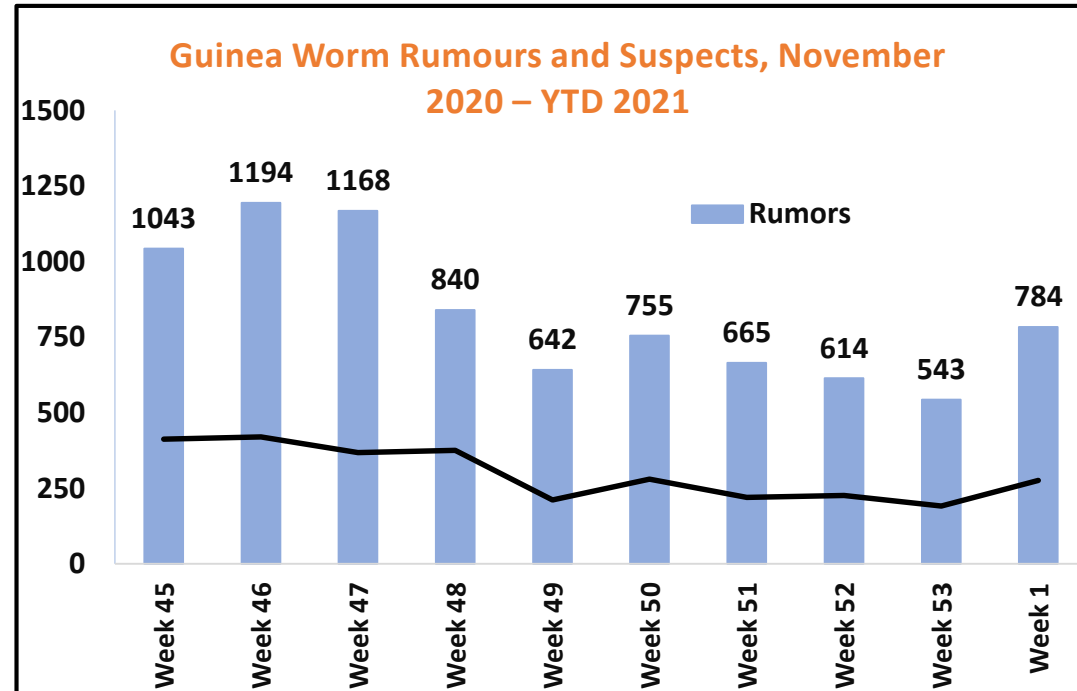
Guinea Worm Disease (GWD) Suspects and Provisional Cases Reported This Week

Suspects

- 276 suspects were detected.
 - 272 human suspects.
 - 4 animal suspect.
- 35.2% of the rumours reported, were suspects.

Provisional Cases/ Infections

- No provisional cases or infections were reported in Week 1.



- On 16th January, 2021 the CHD in Boma reported cases of diarrhea with no deaths in Raat area. Five deaths were reported in July 2020 and there were no response taken. There is no health facility or medical personnel in Raat and the area is inaccessible from Pibor.
- Raat is at the border with Ethiopia, from Raat to Boma is about 4-5 hours driving in dry season but up to now it is inaccessible as the road is still flooded. Drinking water source is the streams.

Response Actions

- MoH with partners are planning to send a team for verification and sample collection.

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS



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





Flooding, South Sudan, week 1, 2021

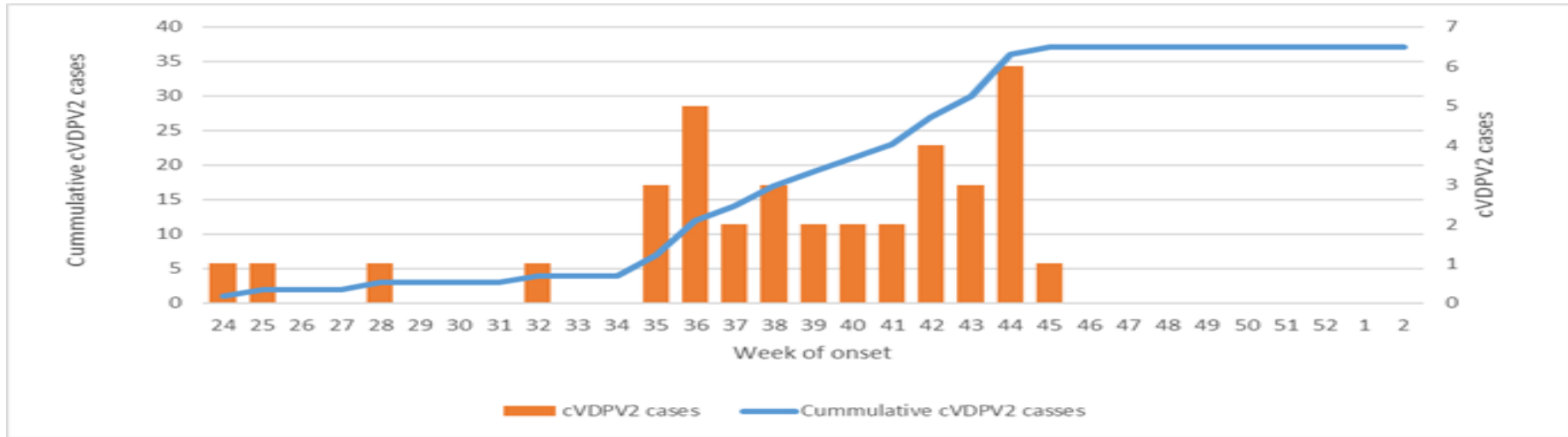
- Over one million (1,034,00 people) affected and 485 000 displaced by flooding across 47 counties since June 2020.
- Two consecutive years of severe seasonal flooding in the country, among other drivers, has contributed to heightened food insecurity in the country in 2021 as projected recent IPC report.
- While water levels continue to recede, most of the road networks connecting Jonglei State & GPAA with neighbouring states remain inaccessible due to flood waters. Air and river transport remain the only means to deliver humanitarian assistance to affected people. Parts of Nyirol, Fangak and Ayod continue to face access challenge because of the flooding and its aftermath.
- Response gap in provision of emergency shelter and non-food items (ES/NFI) has been reported in Mundri East and Mundri West where 20,000 IDPs are awaiting emergency shelter materials.
- Results of assessment done in Baow Payam, Koch County to be shared

Health Cluster Response:

- A pre-emptive oral cholera campaign (OCV) was concluded in Bor where the second round of the campaign ended on 14 January 2021. Preliminary data indicates that 56,615 individuals were vaccinated out of the targeted 71,852 (78.8%). A coverage of 88% (63 280 people vaccinated) was achieved during the first round of the campaign.
- The first round OCV began on 16 January 2021 in Pibor where 93 250 individuals are targeted. The campaign is expected to be conducted in Mangala and payams bordering the regions of Ethiopia with ongoing cholera outbreak.
- WHO mobile teams are conducting outreaches in floods-affected locations in Pibor,
- For now there are NO plans to conduct OCV campaigns in Mangala and the populations bordering Ethiopia.



Epidemic curve cVDPV2 outbreak by week of onset of paralysis



- The total number of AFP cases confirmed as cVDPV2 remain 37, and the geographical distribution of circulating Vaccine Derived Polio Virus cases are as follows: Western Bahr El Ghazal (7), Warrap state (16), Central Equatorial state (4), Northern Bahr El Ghazal (3), Lakes (3), Western Equatoria state (1), Jonglie (1), Upper Nile (1) and Eastern Equatoria state (1).
- The country has conducted at least a round of mOPV2 campaigns, in most counties, to ensure every child gets a second opportunity a planned national campaign for mOPV2 is planned in Feb 2021.
- Coordination and response activities: The National Incident Management System (IMS), continued to meet daily chaired by the Director-General for Primary Health Care, Ministry of Health, with participation from WHO, UNICEF, AFH, CORE Group, and IOM.

Advocacy and social mobilization

- ACSM team continued to obtain regular updates on preparation status from states thrice a week as check in calls for the preparedness of the campaign continues with state C4D officers. These check in calls help the country team to address challenges and address the bottlenecks for the campaign
- Social maps are being revised and used for planning community mobilization activities for the campaign.



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	3	422 (0.007)	Yes	No	Yes	Yes
Measles	Ibba	25/1/2020	2	55 (0.36)	Yes	Yes	Yes	N/A





- Measles outbreaks confirmed in 2020

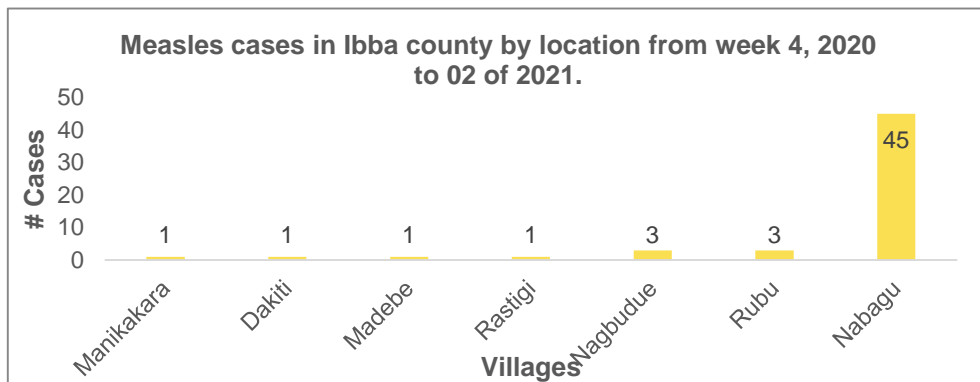
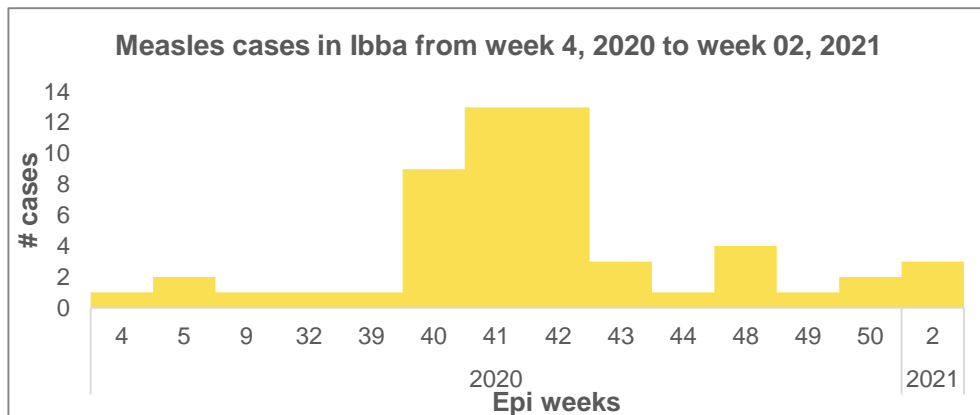
- 8 counties – Tonj East, Magwi, Bor, Kapoeta East, Tonj South, Wau and Pibor

- Locations with ongoing measles transmission

- Ibba County



Confirmed Measles Outbreak in Ibba



Age group	Cases	Percentage	CUM. %
0 - 4 Years	19	35%	35%
10 - 14 Years	11	20%	55%
15 + Years	9	16%	71%
5 - 9 Years	16	29%	100%
Grand Total	55	100%	

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.
- 2 cases were reported in week 2, 2021 makes a total of 55 cases since beginning of 2020
- 35% of the cases are less than 5 years of age
- 42% are female and 58% male
- Most affected areas are Maniakakara and Dakiji
- Measles follow up campaign, achieved 99% early 2020

Response Actions:

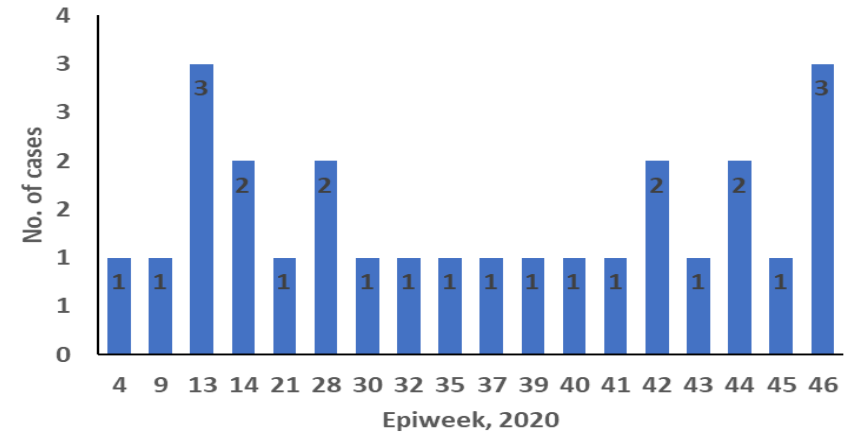
- An assessment mission recommended the need to strengthen routine immunization (thru static and outreach vaccination; social mobilization for routine immunization; and enhanced measles case-based surveillance).
- The implementing NGOs, (Action Africa help (AAH) responded through enhanced routine vaccination outreaches to the affected and at-risk villages but these were not optimized due to resource constraints.
- Reactive measles campaign was concluded in Ibba with total of 11,896 children age 6-59 month been vaccinated and coverage of 96%.

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

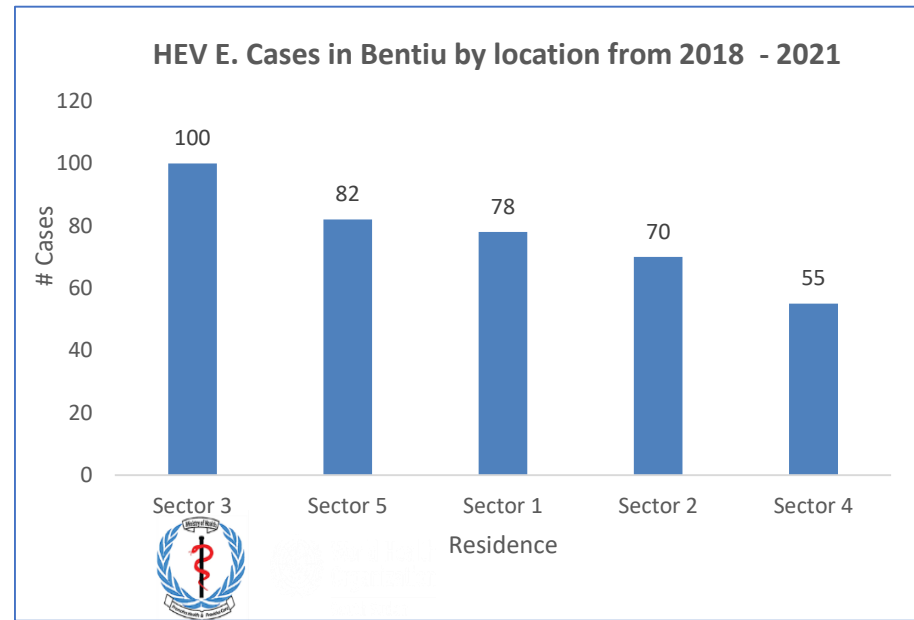
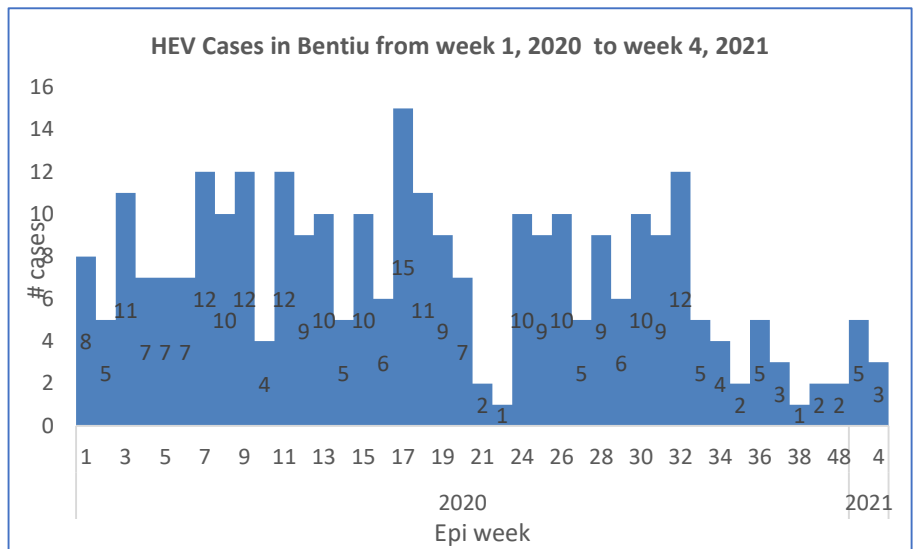


Response

- Awaiting PCR results for four samples sent to UVRI
- Continue line-listing and case management
- Health partners and facilities to provide case management paying attention to pregnant mothers and patients with underlying liver diseases who are likely to develop severe disease and poor outcomes
- Water quality testing and WASH assessment done and findings to be shared with WASH cluster for action



Hepatitis E, Bentiu PoC (1)



Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 422 cases since beginning of 2019
- There were (3) new cases reported in week 4, 2021
- All the cases were managed as outpatient cases except for seven cases who were admitted
- 5 deaths reported in 2019 and 2020
- 48% are female and 52% are male.
- Age group less than 15 years had the most cases with (74%) 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 4, 2021; there were 417 cases of HEV in Bentiu PoC including 5 deaths (CFR 0.012%)

Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	129		129	31%	0%	31%
10 - 14 Years	67		67	16%	0%	46%
15+ Years	106	3	109	26%	3%	72%
5 - 9 Years	115	2	117	28%	2%	100%
Grand Total	417	5	422	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 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





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
Measles	Aweil East	29/12/2019	NR	664 (0.127)	Yes		No	Yes
Measles	Pibor	27/1/2020	NR	355 (0.0028)	Yes		Yes	Yes
Measles	Wau	5/1/2020	NR	39 (0.051)	Yes		Yes	Yes
Measles	Bentiu PoC	24/04/2019	NR	482 (0.006)	Yes		Yes	Yes



OCV Updates in Bor and Pibor

Bor:

- Oral cholera campaign was conducted in Bor where over 63000 (88% coverage) people (one year and above) were vaccinated during the first round of the campaign that ended on 20 December 2020.
- The second round of the campaign ended on 14th January 2021 with over 56, 615 (78.8%) people (one year and above) were covered.

Pibor:

- OCV campaign in Pibor will start on 16th January 2021 targeting 93, 250 people one year and above in Pibor, Lekuangule, Verteth and Gumuruk.
 - **Pibor:** the campaign ended on 21st January, a total of 24, 912 (**90%**) people one year and above were vaccinated.
 - **Gumuruk;** the campaign ended with total of 26,281 (**95%**) people one year and above were vaccinated.
 - **Verteth:** the campaign ended with a total of 6,767 (**57%**) individuals one year and above.
 - Lekuangule will be shared in the next bulletin

Cholera alert: for counties (in Jonglei, Greater Pibor AA, and Kapoeta East) bordering Ethiopia (1)

- South Sudan is endemic for cholera and from 2014-2017, at least 28,676 cases & 644 deaths were reported with NO cholera cases been confirmed in 2018, 2019, and 2020
- On 15th December 2020, WHO cholera team in Geneva alerted us of confirmed cholera cases in South Bench woreda, Bench Maji Zone (SNNP) in Ethiopia which is on the Sudan border.
- As of week 49, 2020, a total of 3,422 cases including 100 deaths (CFR 2.92%) have been reported from three regions – SNNP, Oromia, and Gambella. Two of the affected regions, SNNP and Gambella, share borders with South Sudan (Akobo county in Jonglei state; Pochalla and Boma in Greater Pibor Administrative area; and Kapoeta East in Eastern Equatoria state).
- Akobo, Pibor, and Pochalla are not classified as cholera transmission hotspot since they have not reported confirmed cholera cases in the last five years. However, one round of oral cholera vaccination campaign was conducted in Pibor town in April 2020 reaching 22,476 (73.2%) of individuals one year and above. A follow up campaign is planned for January 15, 2021 targeting 93,250 individuals aged one year and above in all the Payams of Pibor.
- Kapoeta East county is classified as a high risk of cholera from the cholera hotspot mapping. Kapoeta East reported 2,106 cases including 26 deaths during the 2016/2017 cholera outbreak. Two rounds of oral cholera vaccination campaigns were conducted in Kapoeta East in 2017 with coverage of 88% and 78% respectively

Recommendations (2)

- Send out and alert to: respective state MoH; CHDs; partners (Health and WASH
- Review and update the contingency stocks for cholera investigation and case management kits
- Request and preposition contingency stocks of cholera investigation and case management kits
- Assess and address WASH needs in the border counties – Akobo; Pochalla; Boma; Kapoeta East
- Strengthen investigation of acute watery diarrhoea/ suspect cholera alerts in the border counties
- Training of frontline health workers on suspect cholera case identification
- Engage high risk communities and their leaders on risk communication for cholera prevention
- Update the state cholera contingency plans – to strengthen surveillance; case management; risk communication; WASH; OCV
- Prepare request for oral cholera vaccines – pre-emptive vaccination for payams sharing borders with affected locations in Ethiopia
- Enhance border surveillance for suspect cholera case detection, reporting and investigation
- Implement other critical activities to prevent the risk of cholera importation into South Sudan
- Review cholera preparedness activities during the weekly multi-hazard meeting in the PHEOC on Fridays 11am to 1pm

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

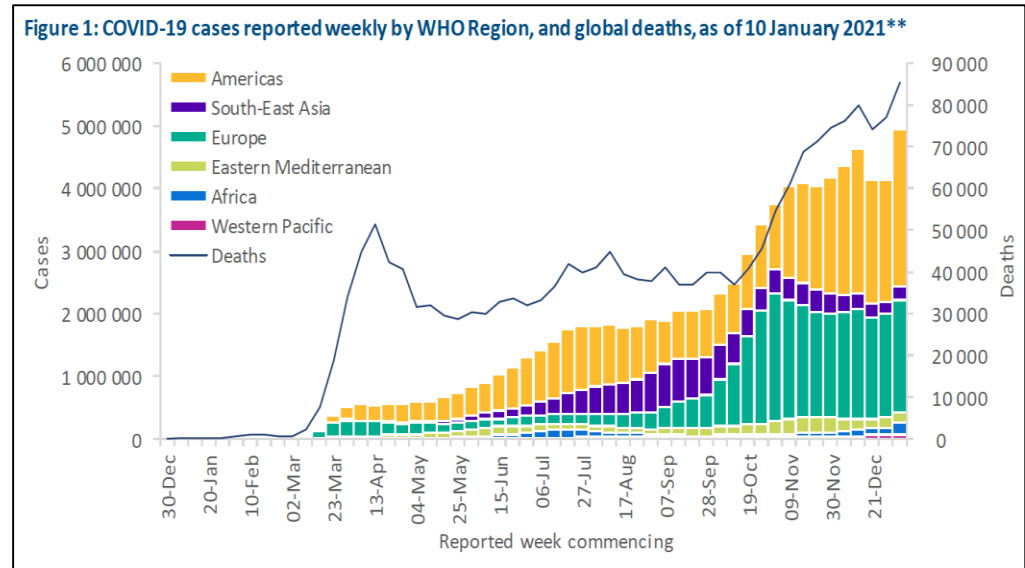


COVID-19 Virus Situation Summary



Situation update as of 10th January, 2020

- The COVID-19 pandemic initial cases were detected in Wuhan China
- Globally **>88, 387 352** million cases (**> 1, 919 204** deaths)
- Africa **>2, 135 878** million cases (**> 47, 905** deaths)

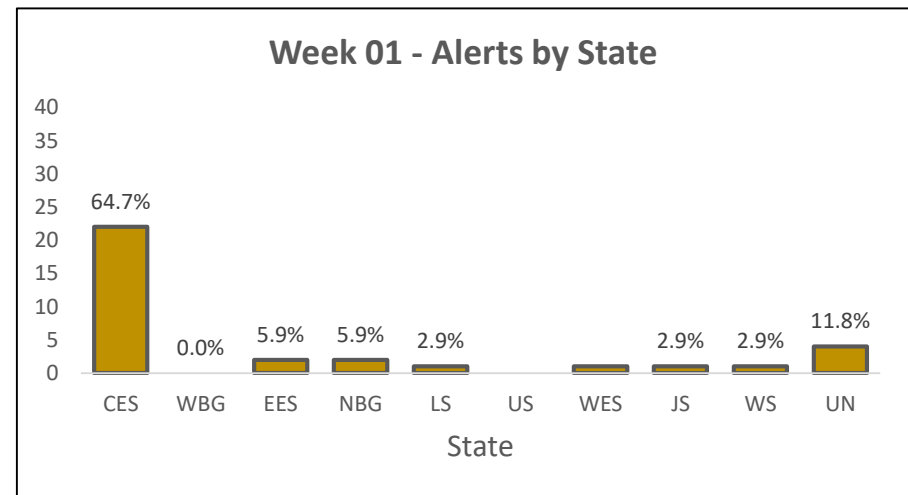
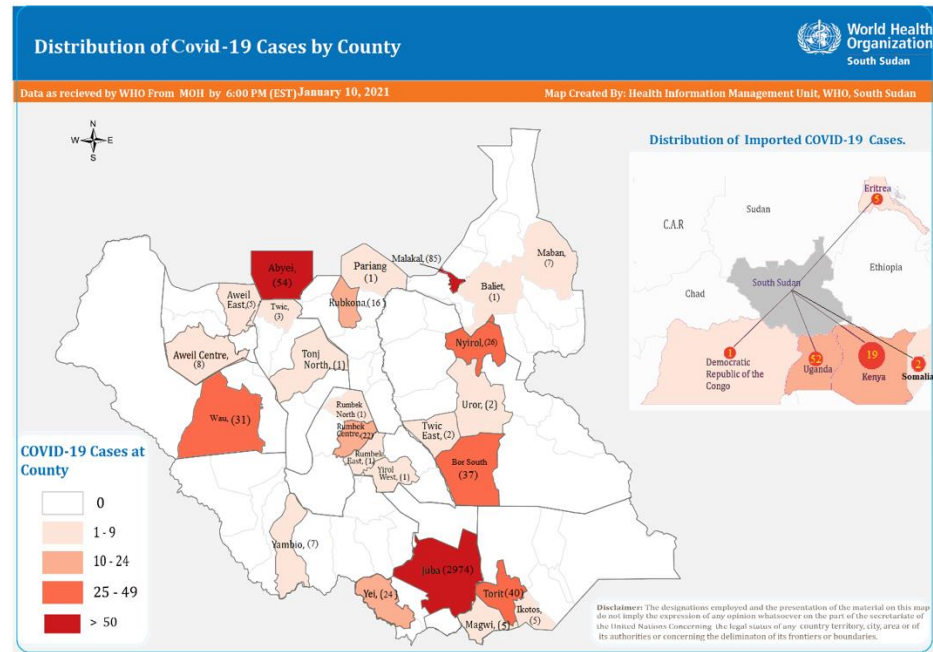


WHO: <https://www.who.int/health-topics/coronavirus>



COVID-19 Response in South Sudan Week 1, 2021

- **3,662** confirmed COVID-19 cases in South Sudan; > **85%** in Juba with **63** deaths and a case fatality rate (CFR) of 2.0%. Total **9,727** 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 1, is above the target of 80%. (9) states were above 80%
- 3,662 confirmed COVID-19 cases in South Sudan; >85% in Juba with 63 deaths (CFR of 2.0%). Total 9,727 contacts identified, quarantined, & undergoing follow up
- A total of 1,758 COVID-19 alerts have been investigated with 1,653 (94.0%) being verified
- With eight outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- There are ongoing measles outbreak in Ibba 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>



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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>

