South Sudan

Integrated Disease Surveillance and Response (IDSR)

Epidemiological Bulletin Week 12, 2020 (March 16 – March 22)



Republic of South Sudan



Major Epidemiological Highlights in week 12 of 2020

- In week 12, 2020 IDSR reporting completeness was 95% and timeliness was 94% at health facility level. EWARN reporting both completeness and timeliness were 78%.
- Of the 148 alerts in week 12, 2020; 78% were verified 0% were risk assessed and 0% required a response. Malaria (26), AWD (37), measles (12) and bloody diarrhea (27) were the most frequent alerts in week 12, 2020.
- In the week, four (4) suspect COVID-19 cases reported from Juba (2);
 Malakal (1); and Aweil (1). No confirmed COVID-19 cases in South Sudan.
- Suspect meningitis case reported and investigated in Angok, Abyei.
- Since week 7 of 2019, a total of 299 ILI/SARI samples have been collected and tested in UVRI 228 being negative; 6 (3%) positive for Influenza B (Victoria); 13(7%) positive for Influenza A (H3); and 12(6%) positive for Influenza A (H1)pdm09 and (20) samples are pending test results.

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 12, 2020

Completeness States <mark>Ranking</mark>	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	113	113	100%	113	100%
2nd	WES	AMREF, World Vision, CUAMM, CDTY, OPEN	213	212	100%	212	100%
3rd	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	120	119	99%	119	99%
4th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS	91	87	96%	88	97%
5th	NBG	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	130	124	95%	125	96%
6th	WBG	Cordaid, Healthnet TPO, CARE International	77	73	95%	74	96%
7th	EES	Cordaid, HLSS, CCM	145	134	92%	136	94%
8th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID	115	103	90%	108	94%
9rd	CES	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO	125	111	89%	113	90%
10th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	155	131	85%	132	85%
	South Sudan		1284	1207	94%	1220	95%

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 94% and completeness was 95%. All 10 states are above the target of 80% with highest reporting rate in WES and Lakes with completeness of 100%.

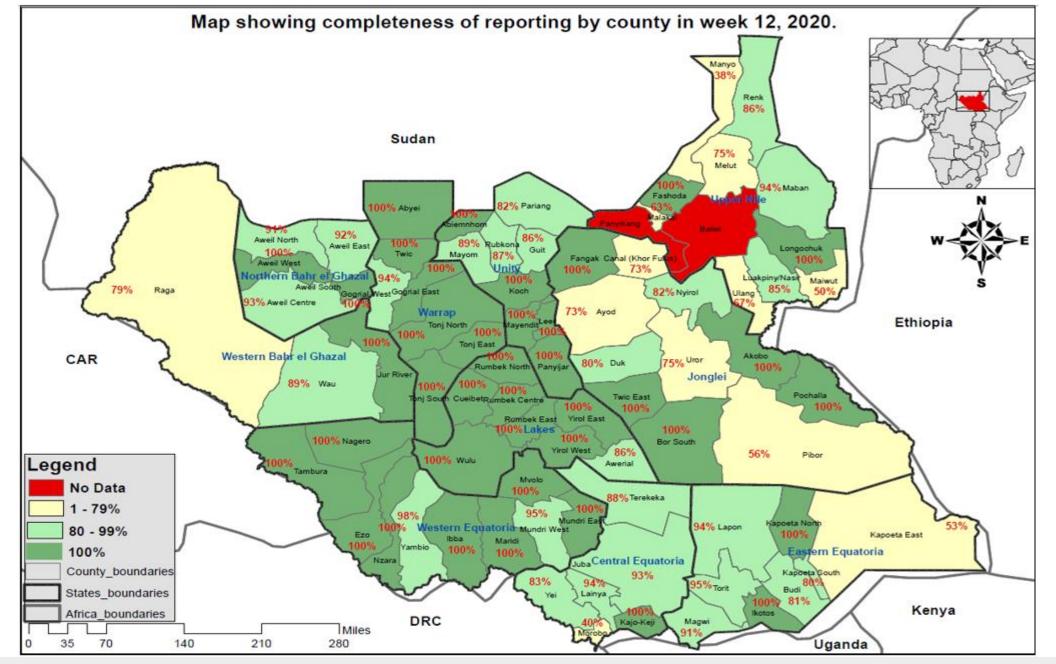


IDSR Timeliness and Completeness Performance at <u>County</u> Level for week 12, 2020 (1)

Counties	Supporting Partners	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	Counties	Supporting Partners	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
Rumbek Centre	Doctors with Africa (CUAMM)	23	23	100%	23	100%	Gogrial West	GOAL	32	30	94%	30	94%
Rumbek East	Doctors with Africa (CUAMM)	24	24	100%	24	100%	Gogrial East	GOAL	15	15	100%	15	100%
Rumbek North	Doctors with Africa (CUAMM)	7	7	100%	7	100%	Abyei	AAA ,Save the Children, MSF	10	10	100%	10	100%
	· · · · · ·						Tonj East	ССМ	12	12	100%	12	100%
Wulu	Doctors with Africa (CUAMM)	14	14	100%	14	100%	Tonj South	CCM	12	12	100%	12	100%
Cueibet	Doctors with Africa (CUAMM)	15	15	100%	15	100%	Tonj North	CCM	14	14	100%	14	100%
	Doctors with Africa						Twic Mayardit	GOAL	26	26	100%	26	100%
Yirol East	(CUAMM),LIVEWELL	11	11	100%	11	100%	Bor	MDM + JDF	35	35	100%	35	100%
Yirol West	Doctors with Africa (CUAMM)	12	12	100%	12	100%	Duk	MDM + JDF	15	12	80%	12	80%
A			-	4000/		1000/	Pibor	LIVEWELL,CRADA	9	9	100%	9	100%
Awerial	Doctors with Africa (CUAMM)	7	7	100%	7	100%	Akobo	NILE HOPE	8	8	100%	8	100%
Yambio	World Vision International	42	41	98%	41	98%	Fangak	CMD,HFO	16	14	88%	14	88%
Ibba	AMREF	11	11	100%	11	100%		Nile Hope,Malaria					
Maridi	AMREF	26	26	100%	26	100%	Uror	Consortium	8	6	75%	6	75%
Mundri West	CUAMM	21	20	95%	20	95%	Nyirol	CMA,Malaria Consortium	11	9	82%	9	82%
Mundri East	CUAMM	19	19	100%	19	100%		,					
Tambura	World Vision International	26	26	100%	26	100%	Twic East	MDM + JDF	11	11	100%	11	100%
Mvolo	CUAMM	11	11	100%	11	100%	Ayod	CMD,EDA	15	10	67%	11	73%
Nzara	World Vision International	20	20	100%	20	100%		,					
Nagero	World Vision International	10	10	100%	10	100%	Pochalla	LIVEWELL	9	9	100%	9	100%
Ezo	World Vision International	27	27	100%	27	100%	Pigi Canal	IMC	11	8	73%	8	73%
Abiemnhom	Cordaid	4	4	100%	4	100%	Mayendit	CASS	13	13	100%	13	100%
Koch	CRADA,IRC.	6	6	100%	6	100%	Guit	CHADO	7	6	86%	6	86%

IDSR Timeliness and Completeness Performance at <u>County</u> Level for week 12, 2020 (2)

Counties	Supporting Partners	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	Counties	Supporting Partners	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
Malakal	IMC	8	4	50%	6	75%	Juba	HLSS	44	42	95%	42	95%
Akoka	IMC	5	0	0%	3	60%	Kajo-Keji	SSUHA, GOAL, TRI-SS	16	16	100%	16	100%
Baliet	IMC	5	0	0%	0	0%	Yei	SSUHA	20	15	75%	16	80%
Renk	WVI + RI	13	12	92%	12	92%							
Melut	WVI + RI	8	6	75%	6	75%	Lainya	SSUHA	16	15	94%	15	94%
Manyo	CORDAID	8	3	38%	3	38%	Morobo	SSUHA,THESO	4	2	50%	3	75%
Maiwut	RI	5	5	100%	5	100%	Terekeka	HealthNetTPO	25	21	84%	21	84%
Fashoda	CORDAID	14	14	100%	14	100%	Torit	Cordaid	20	19	95%	19	95%
							Lopa Lafon	HLSS	18	17	94%	17	94%
Ulang	UNKEA,RI	18	12	67%	12	67%	Ikotos	HLSS	27	27	100%	27	100%
Maban	WVI + RI	16	16	100%	16	100%	Magwi	HLSS	22	21	95%	21	95%
Luakping Nasir	UNKEA,RI	26	22	85%	22	85%	Budi	Cordaid	21	17	81%	17	81%
Longechuk	RI	9	9	100%	9	100%	Kapoeta South	ССМ	10	10	100%	10	100%
Panyikang	IMC	4	0	0%	0	0%	Kapoeta East	ССМ	12	6	50%	8	67%
Aweil West	HealthNetTPO	37	37	100%	37	100%	Kapoeta North	ССМ	16	16	100%	16	100%
Aweil East	IRC,TADO	36	33	92%	34	94%	Wau	Cordaid	28	27	96%	27	96%
	, 						Raja	HealthNetTPO	14	11	79 %	12	86%
Aweil Center	Malaria Consortium(MC)	15	15	100%	15	100%	Jur River	Cordaid	35	35	100%	35	100%
Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%							
Aweil North	HealthNetTPO,IHO	33	30	91%	30	91%	Rubkona	Cordaid, IRC, IOM, MSF	15	14	93%	15	100%
Pariang	CARE International	11	9	82%	9	82%	Mayom	CASS	9	8	89%	8	89%
Panyijiar	IRC	15	15	100%	15	100%	Leer	UNIDOR	11	11	100%	11	100%



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.

Partner	P	erformance	Re	eporting
	# of sites	# of reports received	Completeness	Timeliness
CMD	1	1	100%	100%
GOAL	2	0	0%	0%
HAA	5	4	80%	80%
HLSS	1	1	100%	100%
HFO	3 2		67%	67%
IMA	9 7		78%	78%
IMC	5 2		40%	40%
MDM	10 10		100%	100%
SMC	6	6	100%	100%
юм	13	13	100%	100%
IRC	1	1	100%	100%
LIVEWELL	4	4	100%	100%
MEDAIR	2	2	100%	100%
MSF-E	6	6	100%	100%
MSF-H	5	2	40%	40%
RHS	3	1	33%	33%
TADO	5	0	0%	0%
TRI-SS	2	2	100%	100%
UNH	3	2	67%	67%
UNIDOR	2	2	100%	100%
WORLD RELIEF	2	2	100%	100%
TOTAL	90	70	78%	78%

Surveillance | EWARS surveillance performance indicators by partner week 12, 2020

 Both completeness and timeliness were 78% for weekly reporting in week 12, 2020 for partner-supported clinics serving IDP sites.



EVENT-BASED SURVEILLANCE

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



States	AJS	ARI	Acute Watery Diarrhoea	Bloody Diarrhoea	Guinea Worm	Malaria	Measles	Total Alerts
Jonglei		10	4	2	1	2		19
Warrap		3	2	2		1		8
EES		4	8	4		2	3	21
Unity	3		2	8		1	2	16
WES		7	10			17	1	35
CES		4	5	2			1	12
NBG		11	2	3		1	1	18
Lakes		1	1	2				4
WBG		1	3	1		2	2	9
UNS		1		3			2	6
Total Grand	3	42	37	27	1	26	12	148

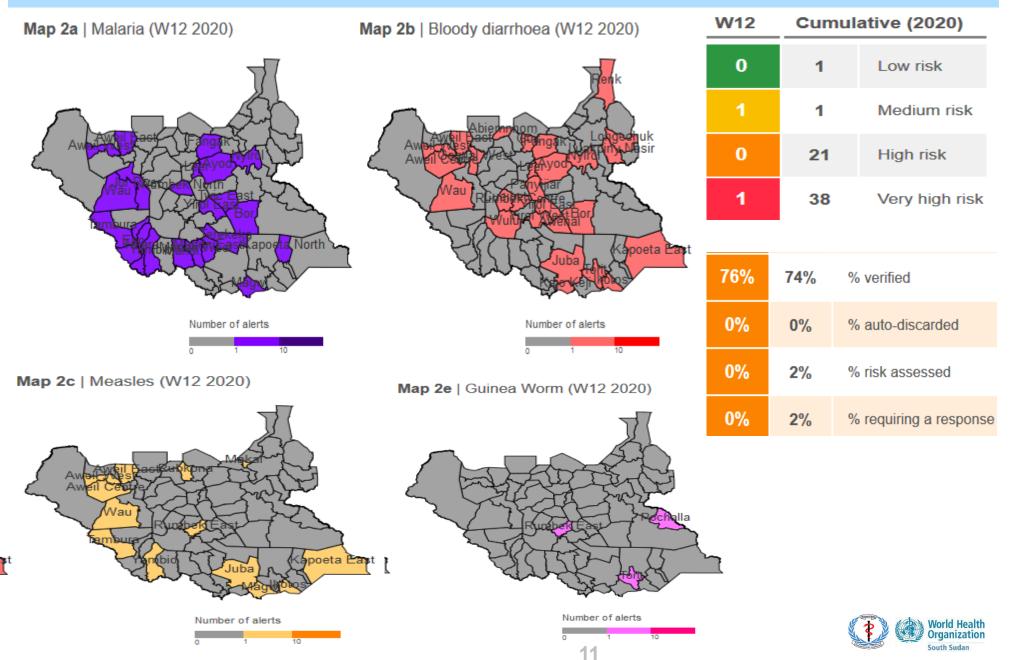
Alert by disease and Hubs in Week 12, 2020 [A total of 148 event specific alerts generated by Hubs]

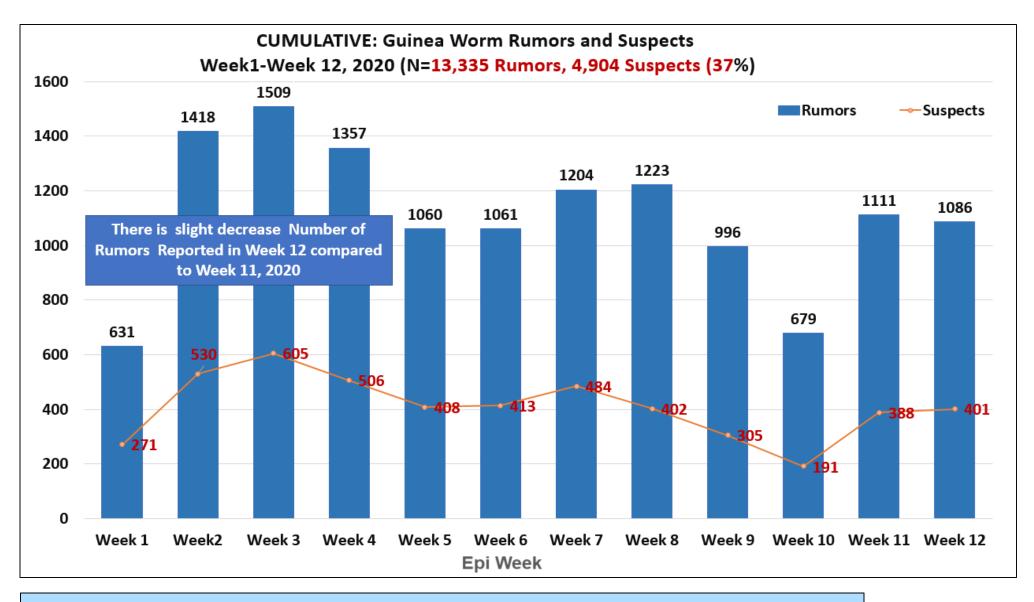
During this week:

- 3 AJS alert: 1 undergoing verification and 2 under monitoring (ongoing HEV outbreak in Bentiu PoC)
- 42 ARI: 15 are undergoing verification, 14 been monitored
- 37 AWD alert: 15 undergoing verification, 17 been monitored
- 27 ABD: 11 undergoing verification,10 been monitored.
- 26 Malaria alerts: 8 undergoing verification, 16 under monitoring
- 12 Measles alert: 2 undergoing verification and 9 under monitoring
- 1 G.W alert: undergoing verification



Alert | Map of key disease alerts by county week 12, 2020

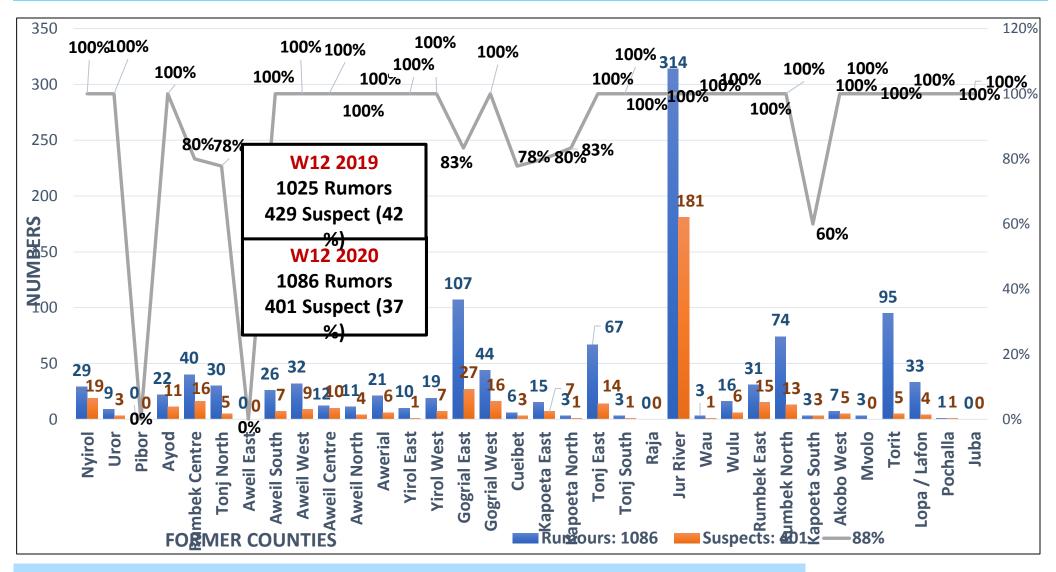




There is a slight decrease in the Number of Rumors and increase in Suspects reported in Week 12 Compared to Week 11



Former Counties that reported Rumors, and Suspects during 15th – 21st March 2020 (12th Week) (n=32)



The Reporting Rate for Week 11 Stands at 95%



SUSPECTED OUTBREAKS IN 2019

Major suspected outbreaks in South Sudan in 2020



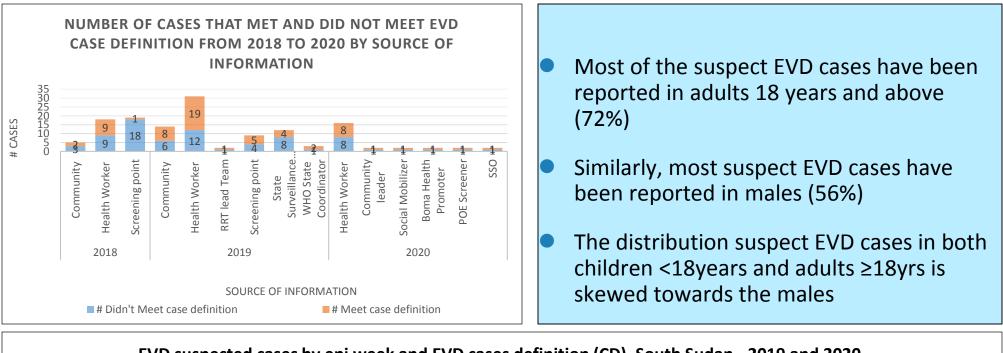
EVD Suspect cases in South Sudan 2018 and 2019 as of week 11, 2020

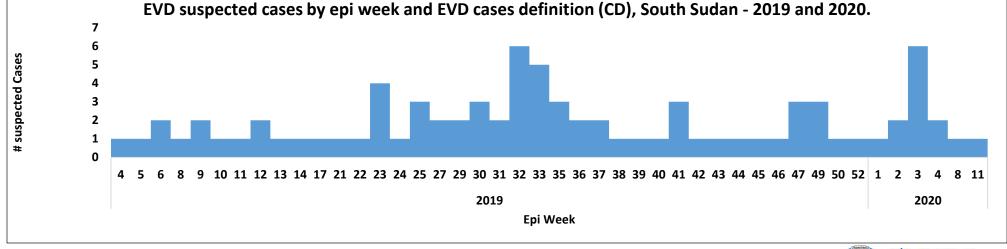
	and the first states a	
30	12	42
3	2	5
9	9	18
18	1	19
32	39	71
6	8	14
12	19	31
1	1	2
4	5	9
8	4	12
1	2	3
13	13	26
8	8	16
1	1	2
1	1	2
1	1	2
1	1	2
1	1	2
75	64	139
	30 3 9 18 32 6 12 1 4 8 1 1 13 8 1 1 1 1 1 1 1 1 1 1 1 1 1	3 2 9 9 18 1 32 39 6 8 12 19 1 1 4 5 8 4 1 2 13 13 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

- 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



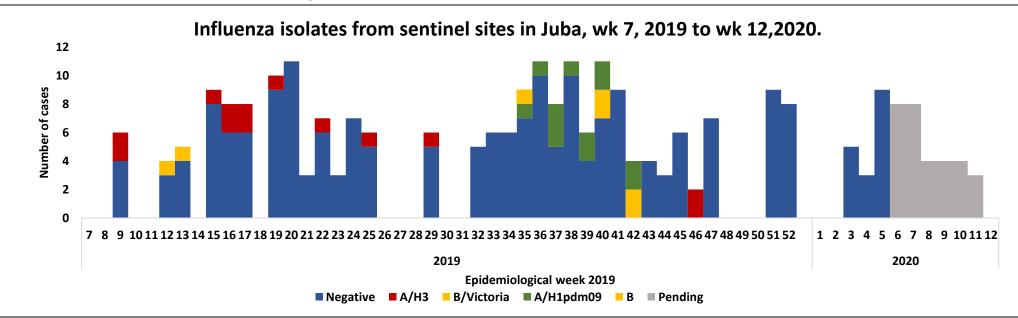
EVD Suspect cases in South Sudan 2018, 2019 and 2020 as of week 11, 2020





World Health Organization

Routine Sentinel Surveillance | Human Influenza



- 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
- There are currently two designated Influenza sentinel surveillance sites in Juba (Juba Teaching Hospital and Al Sabah Children's Hospital) that are collecting epidemiological data and samples from ILI/SARI cases
- Since week 7 of 2019, a total of 299 ILI/SARI samples have been collected and tested in UVRI 228 being negative; 6 (3%) positive for Influenza B (Victoria); 13(7%) positive for Influenza A (H3); and 12(6%) positive for Influenza A (H1)pdm09 and (20) samples are pending test results .
- Since the beginning of 2019; Influenza A (H3) has been the predominant isolate. However, Influenza A (H1)pdm09 emerged from week 35 as a new circulating strain.

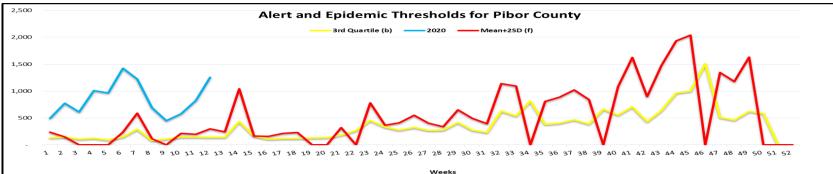
Response | Suspect epidemics; Curent Malaria trends 12, 2020

Malaria was the leading cause of morbidity and mortality, accounting for 43.1% of all morbidities and 5.1% of all mortalities in week 09, 2020 There were 4 County with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

- Unity hub (Rubkona, Koch) 1.
- Bor hub (Pibor, Ayod) 2.

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.
- Stocking up on malaria prevention (LLINs), diagnostics (RDTs), medicines (ACTs), and enhancing 4. 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



Aetiological	Location	Date first	New cases	Cumulative cases to		Interventi	entions		
agent			date (attack rate %)	Case managem ent	Vaccinatio n	Health promotion	WAS H		
Ongoing epic	demics								
Hepatitis E	Bentiu PoC	03/01/2018	3	236 (0.012)	Yes	No	Yes	Yes	
Measles	Bentiu PoC	24/04/2019	1	403 (0.002)	Yes	Yes	Yes	N/A	
Rubella	Rumbek	17/9/2019	NR	23(0.35)	yes	No	Yes	N/A	
	East								
Measles	Aweil East	29/12/2019	9	205 (0.04)	Yes	Νο	Yes	N/A	



Measles outbreaks confirmed in 2020

–5 counties – Tonj East, Magwi, Bor, Kapoeta East, & Tonj South

- Locations with ongoing measles transmission
 Aweil East
 - Bentiu PoC

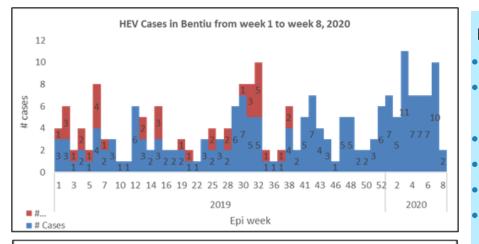


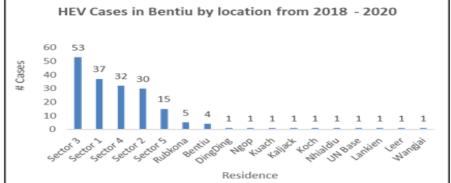
Measles Outbreak situation & response by county as of week 12, 2020

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	Awiel East	519,537	10	195	205	39.4	0	0	2-Jan-20				active	
6	Bentiu PoC	115,479			96	83	2	2	1 Jan 2019	Reactive campaign	126%	IOM	Active	Reactive campaign 20 Jan 2020
Total		1,155,268	41	265	402	34.8	2	0.5						



Confirmed Measles Outbreak in Aweil East County





A C	6	Deveenteere	C 0/	
Age Group	Cases	Percentage	Cum.%	
0 - 4 Years	108	53%	53%	
15 + Years	50	24%	77%	
10 - 14 Years	25	12%	89%	
5 - 9 Years	22	11%	100%	
Grand Total	205	100%		

Descriptive Epidemiology:

- Initial cases were reported on 2nd Jan, 2020
- A total of 205 suspected measles cases have been line listed in Aweil East county
- Majority of the cases were from Baac and Madhol payams
- 12 new cases were reported in week 09, 2020
- (108) 53% of the cases are less than 5 years of age
- Male were 59% of cases and female were 41%

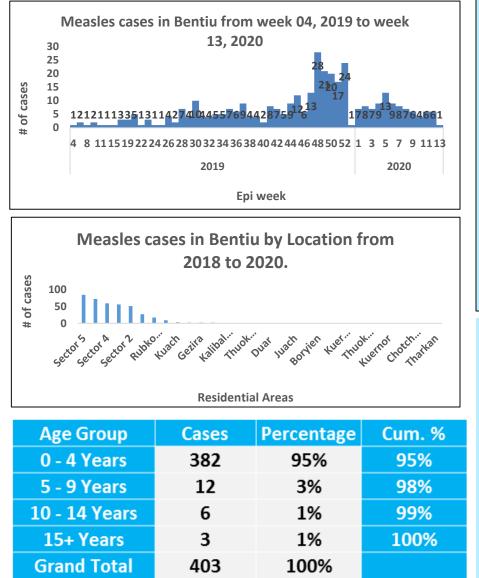
Response and Recommendations

- 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



Response | Confirmed epidemics

Confirmed Measles and Rubella outbreak in Bentiu PoC



Epidemiological description

- Bentiu PoC has been reporting suspected measles/rubella cases since week 4 of 2019.
- 05 new cases reported in week 13, 2020
- At least 403 measles cases including 1 death (CFR 0.3%) 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).

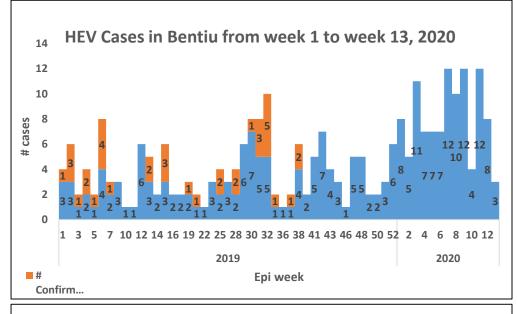
Response actions

- 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.

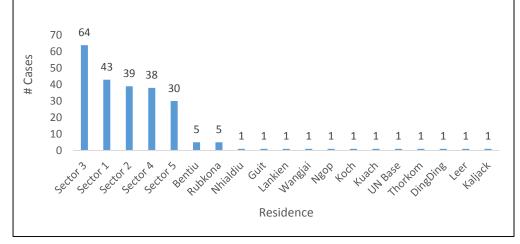


Response | Confirmed epidemics

Hepatitis E, Bentiu PoC (1)







Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 236 cases since beginning of 2019
- There were (03) new cases reported in week 13, 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
- 51% are female and 49% are male.
- Age group less than 15 years had the most cases with (76%) 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 13, 2020; there were 46 cases of HEV in Bentiu PoC including 2 deaths (CFR 0.27%)

Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	76		76	32%	0%	32%
10 - 14 Years	40		40	17%	0%	49%
15+ Years	55	2	57	24%	4%	73%
5 - 9 Years	62	1	63	27%	2%	100%
Grand Total	233	3	236	100%	0.01	



Hepatitis E, Bentiu PoC (2)

Updates:

- Every AJS patient received a package of hygiene kit and MSF is doing follow up to the patients every week for period of three weeks.
- The community engagement and community awareness on HEV key messages are ongoing and are mainly concentrating of Personal hygiene like: washing hand always and use of latrines.
- The work on backfilling the two ponds is ongoing and the small pond is likely to finish, but the work in other big pond still ongoing and the clear update will be provided by CCM Cluster in next meeting (IOM CCM Cluster was absent during the meeting).
- The distribution of some WASH/NFIs kits to the affected families is ongoing.
- There is still a big gap in water storage in the HH level and the WASH Partners has only 3000 water storage buckets which not be enough for estimated 31,000 HH, Therefore the WASH are planning looking of other solution to distribute collapsing Jerrycans with the obstacles the community will not accept the last option.
- •The working on installation of hand washing facilities is ongoing (Wash partners will provide the statistics in next meeting, the number of hand washing facilities installed).

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 threats of COVID -19 Pandemic Outbreak, WASH partners should increase the coverage of hand washing facilities within the PoCs community ASAP.
- 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 stope 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

			New cases	Cumulative	Interventions					
Aetiological agent	Location (county)	Date first since last reported bulletin		cases to date (attack rate %)	Case management	Vaccination	Health promotion	WASH		
Controlled epider	mics									
Measles	Juba	21/11/2019	NR	6(0.1667)	Yes	No	Yes	N/A		
Measles	Tonj East	12/12/2019	6	61(0.98)	yes	Yes	Yes	N/A		
Measles	Bor	17/01/2020	3	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 14 April 2020

Current situation	 Currently as of 12 April 2020 3457 Cases [3310 confirmed &143probable] 2277 Deaths [2183 confirmed & 94 probable]
Response update	 Two new confirmed cases of Ebola virus disease (EVD) were reported in Beni Health Zone on 10 and 12 April. A total of 213 contacts of these cases have been registered, 116 of whom were followed on 12 April 2020, and 90 were vaccinated.
Affected health zones	 As of 12 April 2020, a total of 3457 EVD cases were reported from 29 health zones, including 3312 confirmed and 145 probable cases, of which 2277cases died (overall case fatality ratio 66%)





Novel Coronavirus



Novel Corona Virus Situation Summary

• Situation update as of 19th March, 2020

SITUATION IN NUMBERS total (new) cases in last 24 hours

Globally 234 073 confirmed (24 247) 9840 deaths (1061)

Western Pacific Region 93 349 confirmed (1016) 3405 deaths (28)

European Region 104 591 confirmed (17 506) 4899 deaths (816)

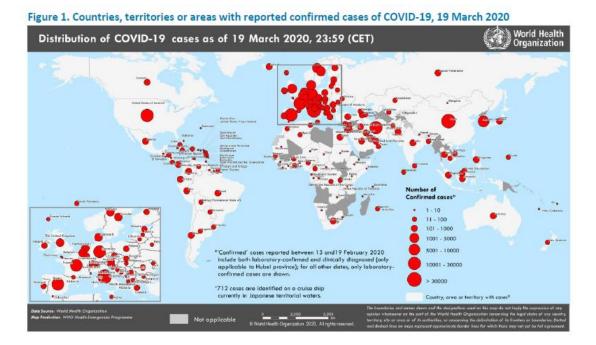
South-East Asia Region 918 confirmed (261) 31 deaths (8)

Eastern Mediterranean Region 20 759 confirmed (1254) 1312 deaths (151)

Region of the Americas 13 271 confirmed (4104) 178 deaths (57)

African Region 473 confirmed (106) 8 deaths (1)

WHO RISK ASSESSMENT Global Level Very High



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

COVID-19 Preparedness in South Sudan

- Total of 10 alerts were investigated and all tested negative for COVID-19
- The national and high-level COVID-19 taskforce committees are coordinating current response
- The national COVID-19 preparedness plan costed at \$10.8 million is approved & passed for implementation
- Implementation of priorities; risk communication; active case search and testing; quarantine for contacts; infection prevention and control; and management of cases are currently underway

Overall Conclusions and Recommendations for week 10, 2020



Conclusion

- The overall IDSR and EWARN reporting performance in week 12, surpasses the target of 80%. All 10 states were above 80%
- With five outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- Yellow fever is confirmed in Kajo-keji and plans for reactive vaccination are underway
- Given the COVID-19 pandemic, it is critical that measures are stepped up to detect, test, and isolate cases, quarantine contacts and communicate COVID-19 risk and prevention



Recommendations

- All partners should support CHDs & HF in Upper Nile and other states to improve IDSR/EWARN reporting
- All partners should support Government to optimize the implementation of the measles control strategy
 - Initiate response to contain measles transmission in Aweil East; Maban; & Bentiu PoC
- Finalize and submit the yellow fever reactive campaign vaccine request to ICG
- Strengthen national capacities for COVID-19 preparedness and response readiness



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-weeklydisease-surveillance-bulletin-2020



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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











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