South Sudan

Integrated Disease surveillance and response (IDSR)

Epidemiological Bulletin Week 2, 2021 (January 11- January 17)



Major epidemiological highlights in week 2 highlights of 2021



- In week 2, 2021 IDSR reporting completeness was 90% and timeliness was 74% at health facility level. EWARN reporting completeness was 89% and timeliness was 72%
- Of the 108 alerts in week 2, 2021; 76% were verified 4% were risk assessed and 3% required a response. Malaria (46), AWD (40), ARI (3), measles (1) and bloody diarrhea (16) were the most frequent alerts in week 2, 2021
- Malaria remains the top cause of morbidity and accounted for 57,348 cases (53.6% of OPD cases)
- A total of 1,774 COVID-19 alerts have been investigated with 1,587 (89.5%) being verified. Total of 3,749 COVID-19 confirmed cases and 64 deaths, CFR of 1.7%
- Other hazards include floods in over 47 counties; measles in Ibba;
 HEV in Bentiu PoC; and Malaria in 3 counties

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 2 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
4th	WBGZ	Cordaid, Healthnet TPO, CARE International,IOM	75	69	92%	75	100%
5th	WES	AMREF, World Vision, CUAMM, CDTY, OPEN	213	126	59%	212	100%
9th	CES	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO	119	112	94%	113	95%
2nd	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	131	109	83%	125	95%
7th	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	119	104	87%	112	94%
1st	Lakes	Doctors with Africa (CUAMM), LIVEWELL	117	87	74%	110	94%
3rd	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS,IOM	88	71	81%	78	89%
8th	EES	Cordaid, HLSS, CCM	142	105	74%	123	87%
6th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	109	88	81%	92	84%
10th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID,Samaritans Purse,IOM	120	41	34%	64	53%
	South Sudan		1233	912	74%	1104	90%

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 74% and completeness was 90%. 9 states were above the target of 80% with highest reporting rate in WBGZ & WES

IDSR timeliness & completeness performance at county level for week 2 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	Cueibet	Doctors with Africa (CUAMM)	15	15	100%	15	100%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	7	100%	7	100%
Lakes	Wulu	Doctors with Africa (CUAMM)	14	14	100%	14	100%
Lakes	Awerial	Doctors with Africa (CUAMM)	11	11	100%	11	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%
WBGZ	Wau	Cordaid	28	28	100%	28	100%
CES	Juba	HLSS	46	46	100%	46	100%
CES	Terekeka	HealthNetTPO	20	20	100%	20	100%
CES	Yei	SSUHA	17	16	94%	17	100%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	14	93%	15	100%
WBGZ	Jur River	Cordaid	35	29	83%	35	100%
NBGZ	Aweil East	IRC,TADO	36	35	97%	35	97%
NBGZ	Aweil West	HealthNetTPO	37	35	95%	36	97%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	22	96%	22	96%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	0	0%	22	92%
NBGZ	Aweil North	HealthNetTPO,IHO	33	16	48%	30	91%
WBGZ	Raja	HealthNetTPO	14	12	86%	12	86%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	17	14	82%	14	82%
CES	Morobo	SSUHA,THESO	5	4	80%	4	80%
CES	Lainya	SSUHA	16	12	75%	12	75%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	6	55%	7	64%

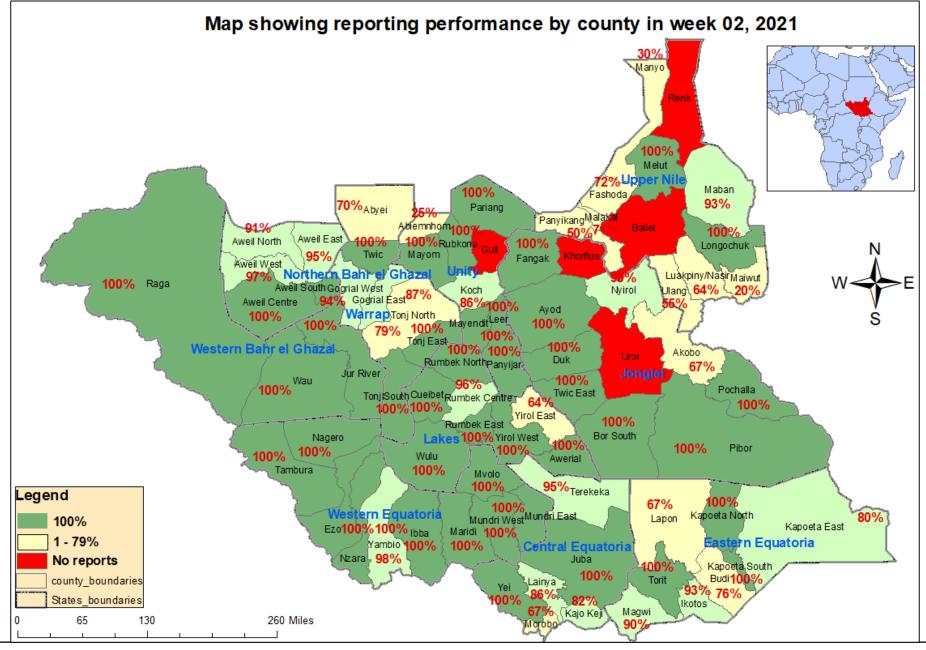
STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Unity	Koch	CRADA,IRC.	5	5	100%	5	100%
Unity	Panyijiar	IRC	15	15	100%	15	100%
Unity	Mayom	CASS	9	9	100%	9	100%
Unity	Mayendit	CASS	12	12	100%	12	100%
WES	Maridi	AMREF	26	26	100%	26	100%
WES	Mundri East	CUAMM	19	18	95%	19	100%
WES	lbba	AMREF	11	10	91%	11	100%
WES	Yambio	World Vision International	42	38	90%	42	100%
Unity	Pariang	CARE International	11	9	82%	11	100%
Unity	Leer	UNIDOR	11	7	64%	11	100%
WES	Ezo	World Vision International	27	16	59%	27	100%
WES	Mundri West	CUAMM	21	10	48%	21	100%
WES	Nagero	World Vision International	10	0	0%	10	100%
WES	Mvolo	CUAMM	11	0	0%	11	100%
WES	Nzara	World Vision International	20	8	40%	19	95%
WES	Tambura	World Vision International	28	0	0%	26	93%
Unity	Rubkona	Cordaid,IRC,IOM,M SF	15	12	80%	13	87%
Unity	Abiemnhom	Cordaid	4	1	25%	1	25%
Unity	Guit	CHADO	7	0	0%	0	0%

IDSR timeliness & completeness performance at county level for week 2 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	Pibor	LIVEWELL,CRADA	5	5	100%	5	100%
Jonglei	Fangak	CMD,HFO	16	16	100%	16	100%
Jonglei	Pochalla	LIVEWELL	7	7	100%	7	100%
EES	Kapoeta South	CCM	10	10	100%	10	100%
EES	Torit	Cordaid	20	18	90%	19	95%
EES	Kapoeta North	CCM	16	11	69%	15	94%
Jonglei	Nyirol	CMA,Malaria Consortium	10	8	80%	9	90%
EES	Ikotos	HLSS	27	21	78%	24	89%
EES	Magwi	HLSS	22	16	73%	19	86%
Jonglei	Ayod	CMD,EDA	15	12	80%	12	80%
EES	Budi	Cordaid	21	9	43%	16	76%
Jonglei	Duk	MDM + JDF	15	11	73%	11	73%
Jonglei	Twic East	MDM + JDF	11	8	73%	8	73%
EES	Lopa Lafon	HLSS	18	12	67%	12	67%
EES	Kapoeta East	CCM	12	8	67%	8	67%
Jonglei	Bor	MDM + JDF	35	21	60%	21	60%
Jonglei	Akobo	NILE HOPE	8	0	0%	2	25%
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
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	Longechuk	RI	9	0	0%	9	100%
Warrap	Twic	GOAL	26	25	96%	25	96%
Warrap	Gogrial West	GOAL	31	23	74%	29	94%
Upper Nile	Fashoda	CORDAID	13	12	92%	12	92%
Warrap	Gogrial East	GOAL	15	13	87%	13	87%
Upper Nile	Melut	WVI + RI	8	0	0%	6	75%
Upper Nile	Maban	WVI,RI,Samaritans Purse	17	11	65%	12	71%
Warrap	Abyei	AAA,Save the Children,MSF	10	5	50%	7	70%
Upper Nile	Luakpiny Nasir	UNKEA,RI	15	9	60%	9	60%
Upper Nile	Makal	IMC	7	2	29%	4	57%
Upper Nile	Ulang	UNKEA,RI	14	4	29%	6	43%
Upper Nile	Manyo	CORDAID	10	2	20%	3	30%
Upper Nile	Maiwut	RI	5	1	20%	1	20%
Upper Nile	Panyikang	IMC	4	0	0%	2	50%
Upper Nile	Baliet	IMC	4	0	0%	0	0%
Upper Nile	Renk	WVI + RI	13	0	0%	0	0%
Upper Nile	Akoka	IMC	5	0	0%	0	0%



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 2 of 2021



Partner	HFs	Repo	rting	Perfor	mance
PARTER	# OF SITES	# 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%
Medicair	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%
UNIDOR	2	2	2	100%	100%
LiveWell	4	4	4	100%	100%
SSHCO	1	1	1	100%	100%
HFD	4	4	4	100%	100%
HFO	2	1	2	50%	100%
MSF-E	6	2	6	33%	100%
HAA	2	0	2	0%	100%
RHS	1	0	1	0%	100%
MSF-H	5	1	3	20%	60%
GOAL	2	0	0	0%	0%
TRI-SS	2	0	0	0%	0%
TOTAL	57	41	51	72%	89%

Completeness was 89% and timeliness was 72% for weekly reporting in week 2, 2021 for partner-supported clinics serving IDP sites.

EVENT-BASED SURVEILLANCE



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





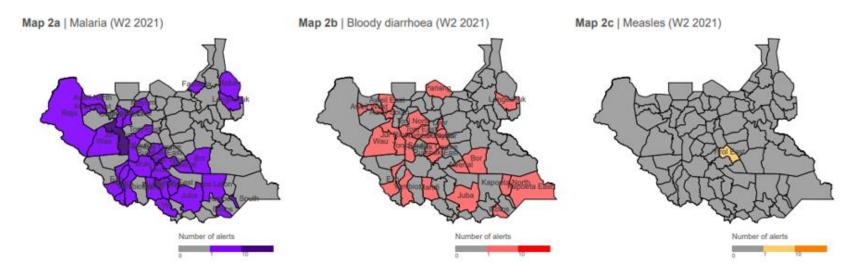
State	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	Bloody Diarrhoea	Malaria	Measles	Guinea Worm	Covid-19	Total alerts
CES		1		2				3
EES		6	5	3				14
Lakes					1			1
Warrap		12	6	11			1	30
WBGZ	3	12	4	13		1		33
WES		9	1	17				27
Total alerts	3	40	16	46	1	1	1	108

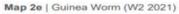
During this week:

- 3 ARI alert: all from WBGZ, sample were collected and tested negative for COVID-19
- 40 AWD alert: 1 from CES, Sample collected, 6 from EES all were treated, 12 from WBG they were treated as mild diarrhea and put under monitoring, 9 from WES, the cases were not presenting with serious diarrhea hence treated and put under monitoring 12 from Warrap State treated as normal diarrhea.
- 16 ABD alert: 5 from EES, 6 from Warrap ,4 from WBGZ and 1 from WES all samples were not collected.
- 46 Malaria alerts:11 from Warrap, 13 from WBG and 17 from WES, 3 from EES and 2 from CES and these are due to the high increase of malaria cases in the Country.
- 1 Measles alert: 1 from lakes' investigation was done and sample was collected for testing.
- 1 Guinea Worm alert: from WBGZ State and the Guinea worm team in the state have investigated.
- 1 COVID-19 alert: The case is from Warrap and sample was collected and tested negative.

Alert: Map of key disease alerts by county of week 2 of 2021









W2	Cumulative (2021)				
1	2	Low risk			
	1	Medium risk			
7	12	High risk			
2	10	Very high risk			

76%	71%	% verified
0%	0%	% auto-discarded
4%	3%	% risk assessed
3%	3%	% requiring a response

SUSPECTED OUTBREAKS





Major suspected outbreaks in South Sudan in 2020



Response | Suspect Epidemics; Curent Malaria trends 2, 2021

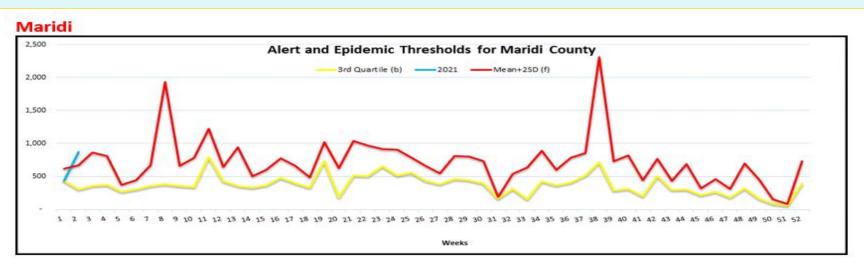


Malaria was the leading cause of morbidity and mortality, accounting for **53.6%** of all morbidities and **20.5%** of all mortalities this week.

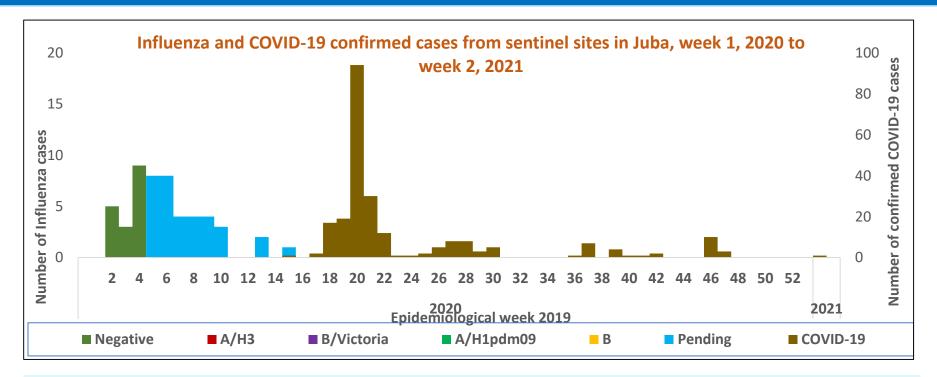
There were 3 county with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

- 1. WBGZ State (Wau)
- 2. Unity State (Pariang)
- 3. WE State (Maridi)

In the PoC sites; malaria is the top cause of morbidity in Bentiu (9%); Juba (45%), and Wau (11%) PoCs, in Malakal PoC malaria accounts for (9%) of OPD consultations, respectively.



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.
- 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 and 10 other sentinel sites based at 9 state hospitals and one county hospital that are collecting epidemiological data and samples from ILI/SARI cases. A total of 4113 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

Suspected Cholera Cases | Greater Pibor, Boma

- 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 faciality 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 till flooded. Drinking water source is the streams.

Response Actions

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

Update on RVF investigations in Yirol/ Lakes State; Lab Results

- Following reports of 175 abortions and 15 deaths in cattle in Yirol in August 2020; joint investigations were
 conducted by the Ministry of Livestock and Fisheries, Ministry of Wildlife, and FAO (Joint One Health
 partners team) from 29 October 2020 to 5 November 2020 to conduct further investigations, strengthen
 surveillance, build community awareness on RVF and collect more animal and human samples.
 - From the first mission, 53 samples were collected 5 tested positive for RVF IgM, 6 samples were doubtful (considered positive) and 42 tested negative.
 - The results of tests from the second mission (160 samples) are shown below:

S/N	Species	RVF- IgM	RVF – IgG
1	Cattle (N= 70)	2 (3 %)	27 (39%)
2	Goat (N= 81)	1 (1%)	8 (10%)
3	Sheep (N= 9)	0 (0 %)	1 (11%)
Total	160	3	36

Summary:

Out of 70 cattle samples, 2 (3%) tested positive for RVF IgM and 27 (39%) tested positive for RVF IgG. One
goat sample tested positive for RVF- IgM and 8 tested positive IgG, none of the sheep samples tested
positive IgM whilst one sample tested positive for IgG.

Next steps:

- FAO to supporting the Ministry of Livestock and Fisheries to send samples to an OIE Reference Laboratory in South Africa.
- A coordination meeting to discuss further actions and the possibility of a Joint ministerial statement on RVF.

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS





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



Response to Public Health Emergencies



Flooding, South Sudan, week 2, 2021

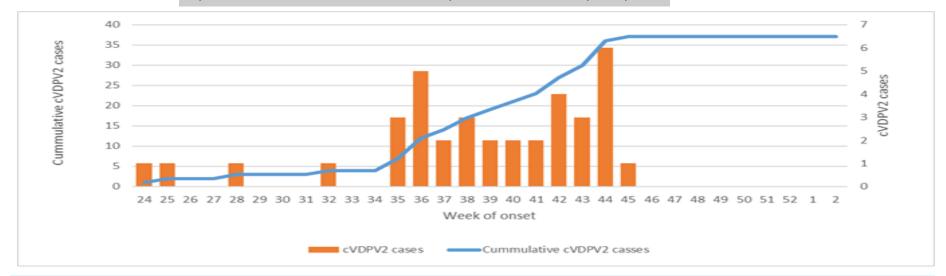
- Over one million (1,034,00 people) affected and 485 000 displaced by flooding across 47 counties since June 2020.
- Two consecutive years of severe seasonal flooding in the country, among other drivers, has contributed to heightened food insecurity in the country in 2021 as projected recent IPC report.
- 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 campaign began on 16 January 2021 in Pibor where 93 250 individuals were targeted.
- 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



- In response to the cVDPV2 outbreak, the country has conducted 2 rounds of mOPV2 campaigns, the first on 10 Nov 2020 vaccinating 1,489,826 under-five children with an administrative coverage of 96%, and a post-campaign evaluation coverage of 90%. The second round was conducted from 8--11th December 2020 targeting 34 counties vaccinating 1,057,590 under-five children with an administrative coverage of 88% and a post-campaign evaluation coverage of 92%.
- The country is planning to conduct a Nationwide campaign targeting over 3 million under 5 children starting from 16 Feb 2021.
- 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).
- No new cases has been reported

Response | Summary of major ongoing outbreaks in 2019 and 2020



	Loggian Data finat		New Cumulative		Interventions			
Aetiological agent	Location (county)	Date first reported	cases since last bulletin	cases to date (attack rate %)	Case management	Vaccinatio n	Health promotion	WASH
Ongoing epider	mics							
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





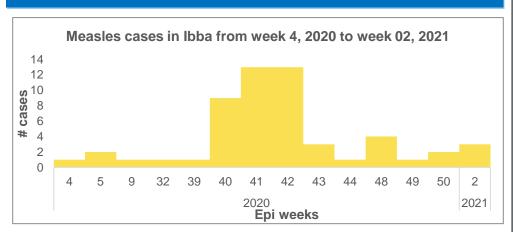
- Measles outbreaks confirmed in 2020
 - ■8 counties Tonj East, Magwi, Bor, Kapoeta East, Tonj South, Wau and Pibor
 - ■No new outbreak confirmed in 2021

- Locations with ongoing measles transmission
 - Ibba County



Response | Suspected epidemics

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%			

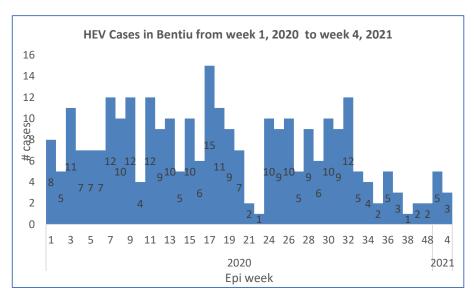
Background and descriptive epidemiology

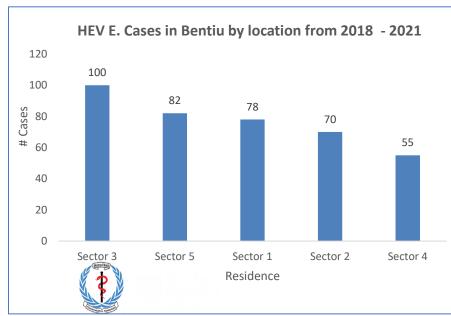
- Measles transmission has persisted in Ibba county despite of the mass vaccination, and the follow up campaign was completed for the two counties – the coverage was 99%
- Suspected measles cases were reported, and two samples tested measles IgM +e.
- 2 cases were reported in week 2, 2021 makes a total 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 Manikakara 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%.

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%
		_				20070
Grand Total	417	5	422	100%	0.01	

Hepatitis E, Bentiu PoC (2)

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



Response | Summary of major controlled outbreaks in 2019, 2020 and 2021



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 epide	emics							
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	N	0	Yes
Measles	Pibor	27/1/2020	NR	355 (0.0028)	Yes	Ye	es	Yes
Measles	Wau	5/1/2020	NR	39 (0.051)	Yes	Ye	es .	Yes
Measles	Bentiu PoC	24/04/2019	NR	482 (0.006)	Yes	Y€	es	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
- Plans for second round is underway.

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



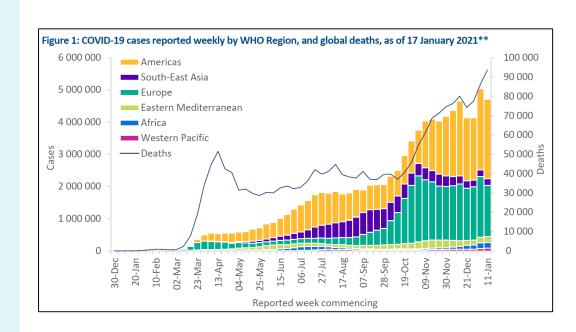


COVID-19 Virus Situation Summary



Situation update as of 17th January, 2020

- The COVID-19 pandemic initial cases were detected in Wuhan China
- Globally >93, 217 287 million
 cases (> 2, 014 957 deaths)
- Africa >2, 313 130 million
 cases (> 52, 905 deaths)

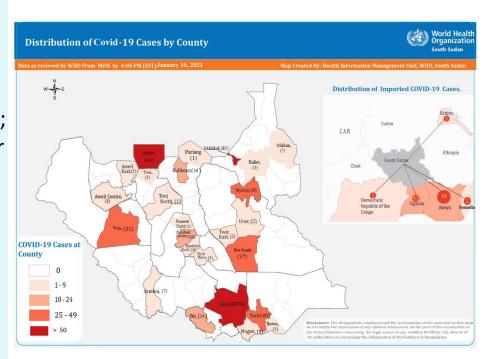


WHO: https://www.who.int/health-topics/coronavirus

COVID-19 Response in South Sudan Week 2, 2021



- 3,749 confirmed COVID-19 cases in South Sudan; > 85% in Juba with 64 deaths and a case fatality rate (CFR) of 1.7%. Total 9,968 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 2, is above the target of 80%. (9) states were above 80%
- 3,749 confirmed COVID-19 cases in South Sudan; >85% in Juba with 64 deaths (CFR of 1.7%). Total 9,968 contacts identified, quarantined, & undergoing follow up
- A total of 1,774 COVID-19 alerts have been investigated with 1,587 (89.5%) 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 casebased 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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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









