South Sudan

Integrated Disease surveillance and response (IDSR)

Epidemiological Bulletin Week 53 (December 28, 2020-January 03, 2021)



Major epidemiological highlights in week 53 highlights of 2020



- In week 53, 2020 IDSR reporting both completeness and timeliness were 76% at health facility level. EWARN reporting both completeness and timeliness were 72%
- Of the 88 alerts in week 53, 2020. Malaria (24), AWD (37), ARI (0), measles (2) and bloody diarrhea (16) were the most frequent alerts in week 53, 2020
- A total of 1,723 COVID-19 alerts have been investigated with 1,618 (93.9%) being verified. Total of 3,589 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 53 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	WBGZ	Cordaid, Healthnet TPO, CARE International,IOM	75	74	99%	74	99%
3rd	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	119	107	90%	107	90%
4th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	131	114	87%	114	87%
5th	Lakes	Doctors with Africa (CUAMM), LIVEWELL	117	93	79%	93	79%
6th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS,IOM	88	67	76%	67	76%
7th	EES	Cordaid, HLSS, CCM	142	104	73%	104	73%
8th	CES	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO	119	87	73%	87	73%
9th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	109	46	42%	46	42%
10th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID,Samaritans Purse,IOM	120	33	28%	33	28%
	South Sudan		1233	937	76%	937	76%

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

Both timeliness and completeness of IDSR reporting (supported by EWARS mobile) at health facility level were 76%. (3) states were above the target of 80% with highest reporting rate in WES.

IDSR timeliness & completeness performance at county level for week 53 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 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	Rumbek Centre	Doctors with África (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 Centre	Malaria Consortium(MC)	15	15	100%	15	100%
WBGZ	Wau	Cordaid	28	28	100%	28	100%
WBGZ	Jur River	Cordaid	35	35	100%	35	100%
CES	Yei	SSUHA	17	17	100%	17	100%
CES	Juba	HLSS	46	45	98%	45	98%
NBGZ	Aweil North	HealthNetTPO,IHO	33	30	91%	30	91%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	8	89%	8	89%
NBGZ	Aweil West	HealthNetTPO	37	31	84%	31	84%
NBGZ	Aweil East	IRC,TADO	36	30	83%	30	83%
WBGZ	Raja	HealthNetTPO	14	11	79%	11	79%
CES	Lainya	SSUHA	16	11	69%	11	69%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	17	11	65%	11	65%
CES	Morobo	SSUHA,THESO	5	3	60%	3	60%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	0	0%	0	0%
CES	Terekeka	HealthNetTPO	20	0	0%	0	0%

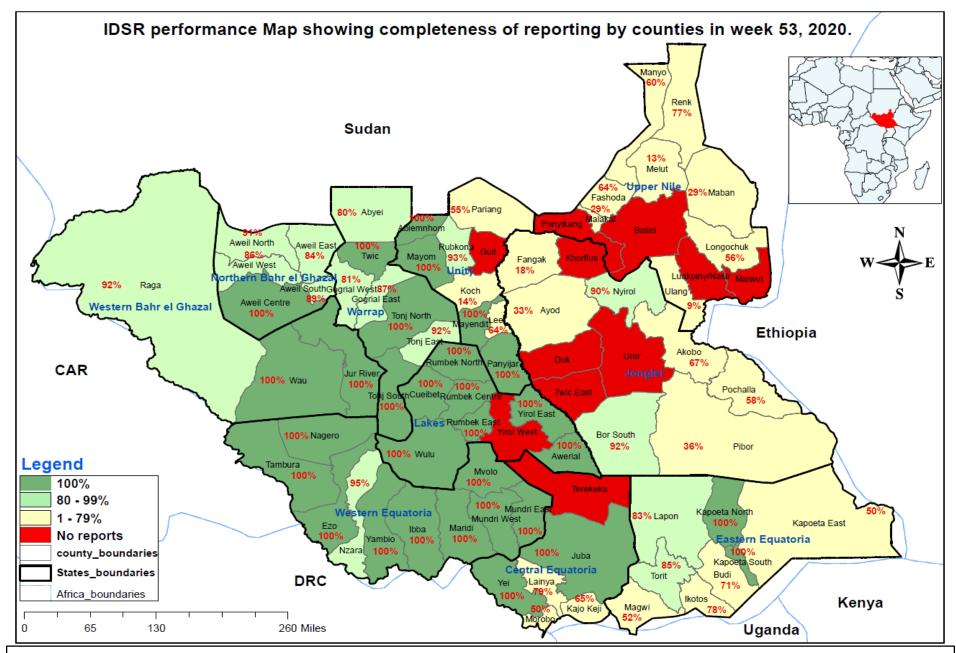
STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Unity	Abiemnhom	Cordaid	4	4	100%	4	100%
Unity	Panyijiar	IRC	15	15	100%	15	100%
Unity	Mayom	CASS	9	9	100%	9	100%
Unity	Mayendit	CASS	12	12	100%	12	100%
WES	Nagero	World Vision International	10	10	100%	10	100%
WES	Mundri West	CUAMM	21	21	100%	21	100%
WES	Maridi	AMREF	26	26	100%	26	100%
WES	lbba	AMREF	11	11	100%	11	100%
WES	Mundri East	CUAMM	19	19	100%	19	100%
WES	Yambio	World Vision International	42	42	100%	42	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	19	95%	19	95%
WES	Tambura	World Vision International	28	26	93%	26	93%
Unity	Rubkona	Cordaid,IRC,IOM,M SF	15	13	87%	13	87%
Unity	Leer	UNIDOR	11	7	64%	7	64%
Unity	Pariang	CARE International	11	6	55%	6	55%
Unity	Koch	CRADA,IRC.	5	1	20%	1	20%
Unity	Guit	CHADO	7	0	0%	0	0%

IDSR timeliness & completeness performance at county level for week 53 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	Pochalla	LIVEWELL	7	7	100%	7	100%
EES	Kapoeta North	CCM	16	15	94%	15	94%
Jonglei	Nyirol	CMA,Malaria Consortium	10	9	90%	9	90%
EES	Torit	Cordaid	20	17	85%	17	85%
EES	Lopa Lafon	HLSS	18	15	83%	15	83%
EES	Kapoeta South	CCM	10	8	80%	8	80%
EES	Ikotos	HLSS	27	21	78%	21	78%
EES	Budi	Cordaid	21	14	67%	14	67%
Jonglei	Bor	MDM + JDF	35	18	51%	18	51%
EES	Kapoeta East	CCM	12	5	42%	5	42%
EES	Magwi	HLSS	22	9	41%	9	41%
Jonglei	Pibor	LIVEWELL,CRADA	5	2	40%	2	40%
Jonglei	Ayod	CMD,EDA	15	5	33%	5	33%
Jonglei	Akobo	NILE HOPE	8	2	25%	2	25%
Jonglei	Fangak	CMD,HFO	16	3	19%	3	19%
Jonglei	Twic East	MDM + JDF	11	0	0%	0	0%
Jonglei	Canal Pigi	IMC	11	0	0%	0	0%
Jonglei	Duk	MDM + JDF	15	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 South	CCM	12	12	100%	12	100%
Warrap	Twic	GOAL	26	25	96%	25	96%
Warrap	Tonj North	CCM	14	13	93%	13	93%
Warrap	Tonj East	CCM	12	11	92%	11	92%
Warrap	Gogrial East	GOAL	15	13	87%	13	87%
Warrap	Gogrial West	GOAL	31	25	81%	25	81%
Warrap	Abyei	AAA,Save the Children,MSF	10	8	80%	8	80%
Upper Nile	Renk	WVI + RI	13	10	77%	10	77%
Upper Nile	Manyo	CORDAID	10	6	60%	6	60%
Upper Nile	Longechuk	RI	9	5	56%	5	56%
Upper Nile	Fashoda	CORDAID	13	5	38%	5	38%
Upper Nile	Maban	WVI,RI,Samaritans Purse	17	4	24%	4	24%
Upper Nile	Makal	IMC	7	1	14%	1	14%
Upper Nile	Melut	WVI + RI	8	1	13%	1	13%
Upper Nile	Ulang	UNKEA,RI	14	1	7%	1	7%
Upper Nile	Baliet	IMC	4	0	0%	0	0%
Upper Nile	Maiwut	RI	5	0	0%	0	0%
Upper Nile	Luakpiny Nasir	UNKEA,RI	15	0	0%	0	0%
Upper Nile	Panyikang	IMC	4	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 53 of 2020



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%
RHS	1	1	1	100%	100%
HAA	2	2	2	100%	100%
World Relief	2	2	2	100%	100%
UNIDOR	2	2	2	100%	100%
CMD	1	1	1	100%	100%
IOM	12	11	11	92%	92%
MSF-E	6	4	4	67%	67%
MSF-H	5	3	3	60%	60%
HFO	2	1	1	50%	50%
HFD	6	1	1	17%	17%
GOAL	2	0	0	0%	0%
TRI-SS	2	0	0	0%	0%
TOTAL	54	39	39	72%	72%

Both completeness and timeliness were 85% for weekly reporting in week 53, 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	Measles	Covid-19	Total alerts
CES		2		1				3
EES		5		3	1		1	10
Jonglei							1	1
Unity	4		1	3	1			9
Upper Nile		2			1			3
Warrap		3	1				1	5
WBGZ		11		6	4			21
WES		14		3	17	2		36
Total alerts	4	37	2	16	24	2	3	88

During this week:

- 4 ARI alert: 4 Unity State and sample were collected and tested in the state.
- 37 AWD alert:2 from CES, sample collected and tested negative for V. Cholerae, 5 from EES and sample collected and tested negative for V. Cholerae, 12 from Lakes the sample was collected and tested negative for V. Cholerae, 1 from Unity state, 1 from Upper Nile, 2 from Upper Nile and sample not collected, 3 from Warrap State, 11 from WBG but sample not collected, 14 from WES sample collected and tested negative for V. Cholerae.
- 16 ABD alert: 1 from CES, 3 from EES, 3 from Unity, 3 from WES and 6 from WBGZ.
- 24 Malaria alerts: 1 from EES, 1 from Unity, 1 Upper Nile 17 from WES and 4 from WBGZ all these are due to the high increase of malaria cases in the Country.
- 3 Covid-19 alert: 1 from EES, 1 Jonglei and 1 from Warrap all were investigated
- 2 Measles alert: were investigated.
- 2 AFP alert: 1 from Unity and 1 from Warrap under investigation

SUSPECTED OUTBREAKS

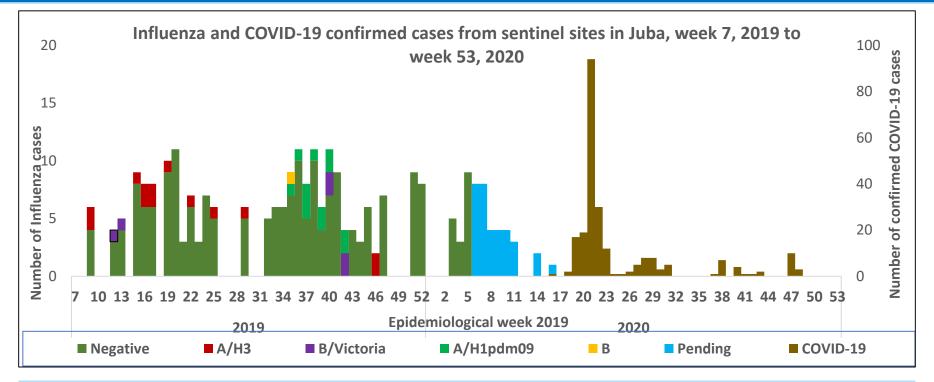




Major suspected outbreaks in South Sudan in 2020



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 20 Covid-19 designated sentinel surveillance sites in Juba that are collecting epidemiological data and samples from ILI/SARI cases. A total of 4072 samples have been collected in 2020 with 233 (5.7%) being positive for COVID-19 in Juba. These sentinel samples have not been tested for influenza in 2020

Update from Bacteriology lab for December 2020 and January 2021

S/N	County (no. of samples)	Sample type	suspected disease	Lab Results	Comment
1	Bor South	stool	V. Cholerae	No Growth	
2	Bor South	stool	V. Cholerae	No Growth	
3	Juba	stool	V. Cholerae	Growth for E Coli	
4	Juba	stool	V. Cholerae	No Growth for V. Cholerae	
5	Ibba	stool	V. Cholerae	No Growth	
6	Rumbek East	CSF	Meningitis	No Growth	
7	Yambio (2)	stool	V. Cholerae	Rejected	Samples reached the lab after 30 days of shippment without Ice
8	Nzara	stool	V. Cholerae	Rejected	
9	Sakure	stool	V. Cholerae	Rejected	
10	Aweil Centre (2)	stool	Shigellosis	Rejected	Samples shipped without transport media
11	Aweil Centre	stool	Shigellosis	Growth of Shigella Spp	

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS





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

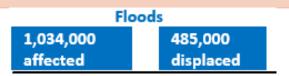


Response to Public Health Emergencies



Flooding, South Sudan, week 53, 2020

- 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 inidicates 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 Mangalla and payams bordering the regions of Ethiopia with ongoing cholera outbreak.
- WHO mobile teams are conducting outreaches in floods-affected locations in Pibor,

Response | Summary of major ongoing outbreaks in 2019 and 2020



Acticlosical			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 epidemics									
Hepatitis E	Bentiu PoC	03/01/2018	2	414 (0.004)	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	Wau	5/1/2020	2	39 (0.051)	Yes	Yes	Yes	N/A	





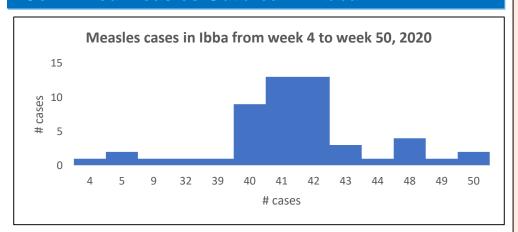
- Measles outbreaks confirmed in 2020
 - ■8 counties Tonj East, Magwi, Bor, Kapoeta East, Tonj South, Wau and Pibor

- Locations with ongoing measles transmission
 - Ibba County



Response | Suspected epidemics

Confirmed Measles Outbreak in Ibba





Age group	Cases	Percentage	CUM. %
0 - 4 Years	18	35%	35%
10 - 14 Years	11	21%	56%
15 + Years	9	17%	73%
5 - 9 Years	14	27%	100%
Grand Total	52	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 50, makes a total of 52 cases since beginning of 2020
- 35% 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

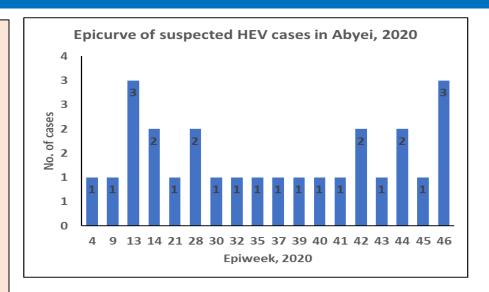
Response Actions:

- An assessment mission recommended the need to strengthen routine immunization (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.

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

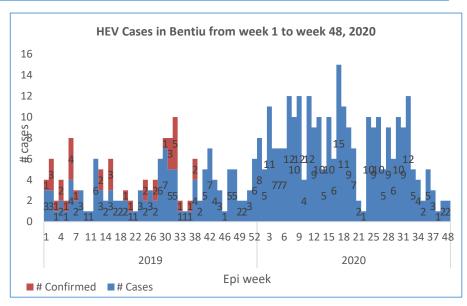


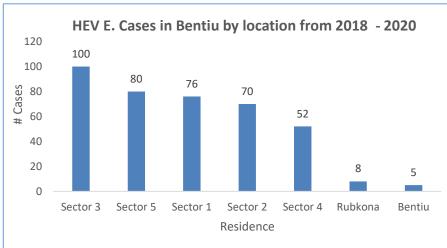
Response

- 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

Response | Confirmed epidemics

Hepatitis E, Bentiu PoC (1)





Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 414 cases since beginning of 2019
- There were (2) new cases reported in week 48, 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 47, 2020; there were 414 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	128		128	31%	0%	31%
10 - 14 Years	66		66	16%	0%	47%
15+ Years	101	3	104	25%	3%	72%
5 - 9 Years	114	2	116	28%	2%	100%
Grand Total	409	5	414	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 and 2020



Aetiological agent	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
					Case management	Vaccination	Health promotion	WASH
Controlled epidemics								
Measles	Juba	21/11/2019	NR	6(0.1667)	Yes	No	Yes	N/A
Measles	Tonj East	12/12/2019	NR	61(0.98)	yes	Yes	Yes	N/A
Measles	Bor	17/01/2020	NR	14(0.214)	yes	No	yes	N/A
Measles	Jebel Boma	10/12/2019	NR	96(0.063)	yes	No	Yes	N/A
Measles	Kapoeta East	18/01/2020	NR	16(0.625)	yes	No	Yes	N/A
Measles	Aweil East	29/12/2019	NR	664 (0.127)	Yes	No		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 will start on 10 and will end on 14th January 2021.

Pibor:

- OCV campaign in Pibor is planned to start on 16th Jan 2021 targeting 93, 250 people one year and above in Pibor, Lekuangule, Verteth and Gumuruk.
- Trainings will started on 13th
 Jan 2021.



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



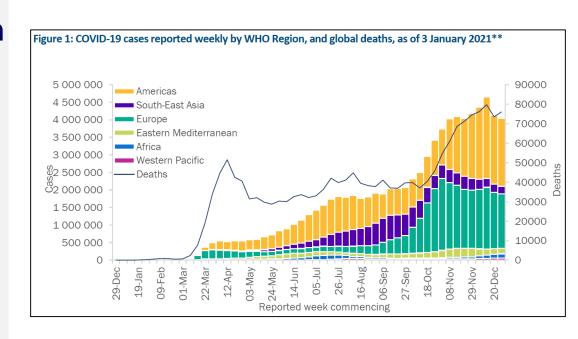


COVID-19 Virus Situation Summary



Situation update as of 9th January, 2020

- The COVID-19
 pandemic initial cases
 were detected in Wuhan
 China
- Globally >83, 326 million cases (> 1, 831 deaths)
- Africa >1, 961million cases (> 43, 592 deaths)



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

COVID-19 Response in South Sudan



- 3,589 confirmed COVID-19 cases in South Sudan; > 85% in Juba with 63 deaths and a case fatality rate (CFR) of 2.0%. Total 9,597 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

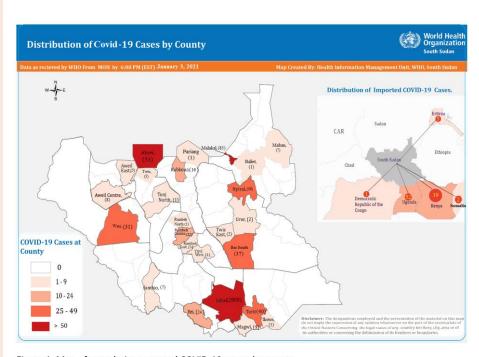


Figure 1. Map of cumulative reported COVID-19 cases, by county

Overall Conclusions and Recommendations



Conclusion

- The overall IDSR and EWARN reporting performance in week 53, is above the target of 80%. (3) states were above 80%
- 3,589 confirmed COVID-19 cases in South Sudan; >85% in Juba with 63 deaths (CFR of 2.0%). Total 9,597 contacts identified, quarantined, & undergoing follow up
- A total of 1,723 COVID-19 alerts have been investigated with 1,618 (93.9%) 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







