## South Sudan

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

**Epidemiological Bulletin Week 5, 2021 (February 1- February 7)** 



## Major epidemiological highlights in week 5 highlights of 2021



- In week 5, 2021 IDSR reporting completeness was 94% and timeliness was 69% at health facility level. EWARN reporting completeness was 95% and timeliness was 71%
- Of the 69 alerts in week 5, 2021; 92% were verified 2% were risk assessed and 1% required a response. Malaria (15), AWD (12), ARI (11), measles (3) and bloody diarrhea (20) were the most frequent alerts in week 5, 2021
- Malaria remains the top cause of morbidity and accounted for 52,981 cases (50.5% of OPD cases)
- A total of 1,835 COVID-19 alerts have been investigated with 1,730 (94.2%) being verified. Total of 4,609 COVID-19 confirmed cases and 69 deaths, CFR of 1.4%
- Other hazards include floods in over 47 counties; 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 5 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	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS,IOM	94	74	79%	94	100%
2nd	WBGZ	Cordaid, Healthnet TPO, CARE International,IOM	78	38	49%	78	100%
3rd	WES	AMREF, World Vision, CUAMM, CDTY, OPEN	213	212	100%	212	100%
4th	Lakes	Doctors with Africa (CUAMM)	113	58	51%	110	97%
5th	EES	Cordaid, HLSS, CCM	142	87	61%	138	97%
6th	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	119	93	78%	114	96%
7th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	131	113	86%	124	95%
8th	CES	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO,IMA	120	104	87%	111	93%
9th	Jonglei	Nile Hope, MDM, JDF, <u>Livewell</u> , CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	101	69	68%	91	90%
10th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID,Samaritans Purse,IOM	122	59	48%	87	71%
	South Sudan		1233	907	74%	1159	94%

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 94%. 9 states were above the target of 80% with highest reporting rate in Unity state Reporting challenges: Insecurity, internet access challenges and lack of network.

## IDSR timeliness & completeness performance at county level for week 5 of 2021 (1)



STATE	COUNTY	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	Awerial	Doctors with Africa (CUAMM)	7	11	157%	7	100%
WBGZ	Raja	HealthNetTPO	15	15	100%	15	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%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	15	100%	15	100%
CES	Yei	SSUHA	17	17	100%	17	100%
CES	Juba	HLSS	46	41	89%	46	100%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	6	86%	7	100%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	14	58%	24	100%
Lakes	Wulu	Doctors with Africa (CUAMM)	14	8	57%	14	100%
WBGZ	Wau	Cordaid	28	14	50%	28	100%
WBGZ	Jur River	Cordaid	35	9	26%	35	100%
Lakes	Cueibet	Doctors with Africa (CUAMM)	15	0	0%	15	100%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	0	0%	23	100%
NBGZ	Aweil West	HealthNetTPO	37	28	76%	36	97%
CES	Terekeka	HealthNetTPO	20	19	95%	19	95%
NBGZ	Aweil East	IRC,TADO	36	31	86%	34	94%
NBGZ	Aweil North	HealthNetTPO,IHO	33	30	91%	30	91%
CES	Kajo Keji	SSUHA,GOAL,TRI- SS,IMA	17	12	71%	14	82%
CES	Lainya	SSUHA	16	12	75%	12	75%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	7	64%	8	73%
CES	Morobo	SSUHA,THESO,IMA	5	3	60%	3	60%

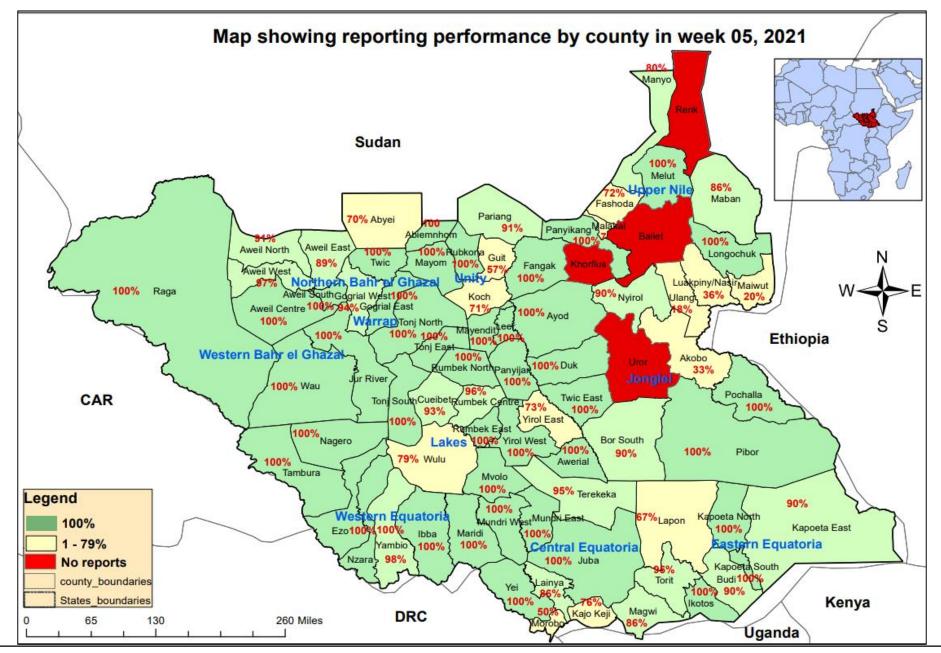
STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Unity	Mayom	CASS	14	13	93%	14	100%
Unity	Koch	CRADA,IRC.	6	5	83%	6	100%
Unity	Abiemnhom	Cordaid	4	4	100%	4	100%
WES	Nzara	World Vision International	20	20	100%	20	100%
WES	Nagero	World Vision International	10	10	100%	10	100%
WES	Mundri West	CUAMM	21	21	100%	21	100%
WES	Maridi	AMREF	26	26	100%	26	100%
WES	lbba	AMREF	11	11	100%	11	100%
WES	Mundri East	CUAMM	19	19	100%	19	100%
WES	Ezo	World Vision International	27	27	100%	27	100%
WES	Mvolo	CUAMM	11	11	100%	11	100%
Unity	Panyijiar	IRC	15	13	87%	15	100%
Unity	Leer	UNIDOR	11	9	82%	11	100%
Unity	Rubkona	Cordaid,IRC,IOM, MSF	15	11	73%	15	100%
Unity	Mayendit	CASS	12	7	58%	12	100%
WES	Yambio	World Vision International	42	41	98%	41	98%
WES	Tambura	World Vision International	28	26	93%	26	93%
Unity	Pariang	CARE International	11	9	82%	10	91%
Unity	Guit	CHADO	7	3	43%	6	86%

## IDSR timeliness & completeness performance at county level for week 5 of 2021 (2)



STATE	COUNTY	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	Awerial	Doctors with Africa (CUAMM)	7	11	157%	7	100%
WBGZ	Raja	HealthNetTPO	15	15	100%	15	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%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	15	100%	15	100%
CES	Yei	SSUHA	17	17	100%	17	100%
CES	Juba	HLSS	46	41	89%	46	100%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	6	86%	7	100%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	14	58%	24	100%
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WBGZ	Jur River	Cordaid	35	9	26%	35	100%
Lakes	Cueibet	Doctors with Africa (CUAMM)	15	0	0%	15	100%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	0	0%	23	100%
NBGZ	Aweil West	HealthNetTPO	37	28	76%	36	97%
CES	Terekeka	HealthNetTPO	20	19	95%	19	95%
NBGZ	Aweil East	IRC,TADO	36	31	86%	34	94%
NBGZ	Aweil North	HealthNetTPO, IHO	33	30	91%	30	91%
CES	Kajo Keji	SSUHA,GOAL,TRI- SS,IMA	17	12	71%	14	82%
CES	Lainya	SSUHA	16	12	75%	12	75%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	7	64%	8	73%
CES	Morobo	SSUHA,THESO,IMA	5	3	60%	3	60%

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	18	13	72%	18	100%
Warrap	Gogrial East	GOAL	15	15	100%	15	100%
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	Melut	WVI + RI	8	8	100%	8	100%
Upper Nile	Panyikang	IMC	4	4	100%	4	100%
Upper Nile	Longechuk	RI	9	9	100%	9	100%
Upper Nile	Akoka	IMC	5	5	100%	5	100%
Upper Nile	Maiwut	RI	5	1	20%	5	100%
Warrap	Twic	GOAL	26	13	50%	25	96%
Warrap	Gogrial West	GOAL	31	20	65%	29	94%
Upper Nile	Manyo	CORDAID	10	7	70%	8	80%
Upper Nile	Maban	WVI,RI,Samaritans Purse	17	7	41%	13	76%
Upper Nile	Makal	IMC	7	0	0%	5	71%
Warrap	Abyei	AAA,Save the Children,MSF	10	7	70%	7	70%
Upper Nile	Ulang	UNKEA,RI	14	0	0%	7	50%
Upper Nile	Luakpiny Nasir	UNKEA,RI	15	5	33%	5	33%
Upper Nile	Baliet	IMC	4	0	0%	0	0%
Upper Nile	Renk	WVI + RI	13	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 5 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%
Medicair	2	2	2	100%	100%
SP	4	4	4	100%	100%
UNH	2	2	2	100%	100%
World Relief	2	2	2	100%	100%
UNIDOR	2	2	2	100%	100%
LiveWell	4	4	4	100%	100%
SSHCO	1	1	1	100%	100%
HFO	2	2	2	100%	100%
RHS	1	1	1	100%	100%
GOAL	2	2	2	100%	100%
Medair	1	1	1	100%	100%
CMD	1	1	1	100%	100%
IOM	12	11	12	92%	100%
MSF-E	6	4	6	67%	100%
MSF-H	5	1	5	20%	100%
IMC	6	1	6	17%	100%
TADO	2	0	2	0%	100%
HFD	6	4	5	67%	83%
TRI-SS	2	1	1	50%	50%
HAA	2	0	1	0%	50%
TOTAL	66	47	63	71%	95%

Completeness was 95% and timeliness was 71% for weekly reporting in week 5, 2021 for partner-supported clinics serving IDP sites.

## **EVENT-BASED SURVEILLANCE**



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





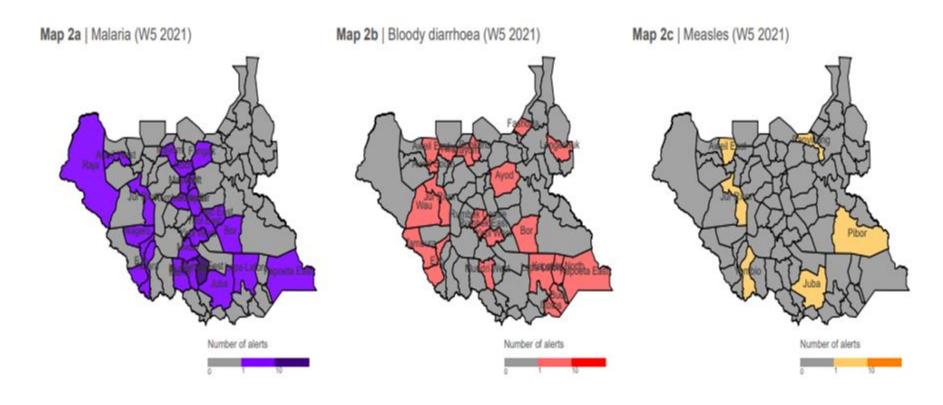
State	Acute jaundice syndrome	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	AFP	Bloody Diarrhoea	Malaria	Measles	EBS	Covid-19	Total alerts
CES			2			1	1			4
EES		3	2		8	2		1		16
NBGZ				1			1			2
Unity	1	7		1	6	7			3	25
Upper Nile		1			2					3
Warrap					1					1
WBGZ			8		3	5	1		1	18
Total alerts	1	11	12	2	20	15	3	1	4	69

#### **During this week:**

- 11 ARI alerts: 3 from EES sample was collected and tested for COVID-19, 7 from Unity sample was collected, 1 UNS sample collected, and all were tested in the state Sentinel Sites.
- 12 AWD alertsss: 2 from CES, sample will be collected, 2 from EES investigation is under way, 8 from WBGZ sample were collected,
- 20 ABD alert: 8 from EES sample will be collected, 6 from Unity under investigation, 2 from UNS under investigation, 1 from Warrap state, 3 from WBGZ.
- 15 Malaria alerts: 1 from CES, 2 from EES, 7 from Unity, 5 from WBGZ,, these are due to the high increase of malaria cases in the country, and all are under monitoring.
- 3 Measles alerts: 1 from CES from El-Sabah Children Hospital sample was not collected since the hospital informed the county late when the patient has left the facility, 1 from NBGZ, and 1 from WBGZ in Bazia Jaded PHCC
- 1 AJS alerts: These are true alerts reported by clinician, in area were there is confirmed acute jaundice(Bentiu PoC)
- 2 AFP alerts: 1 from Gogrial West, Kuajok Hospital sample was collected for laboratory confirmation 1 from Mayom county,
   Mankien PHCC in Unity State sample was collected and sent to juba but still waiting for results.
- 4 COVID-19 alert: 3 from unity and 1 WBGZ investigation was done, and sample collected for testing.
- 1 EBS alerts: The event had been reported by Medical officer who is working with UNMISS (Torit Office) for a man 45 years old, representing with high fever, dry cough, difficult in breathing the investigation was done, sample was collected and tested positive for COVID-19.

## Alert: Map of key disease alerts by county of week 5 of 2021





W5	Cumu	Cumulative (2021)				
2	5	Low risk				
5	5	Medium risk				
-1	30	High risk				
0	14	Very high risk				

92%	81%	% verified
0%	0%	% auto-discarded
2%	4%	% risk assessed
1%	3%	% requiring a response

## SUSPECTED OUTBREAKS

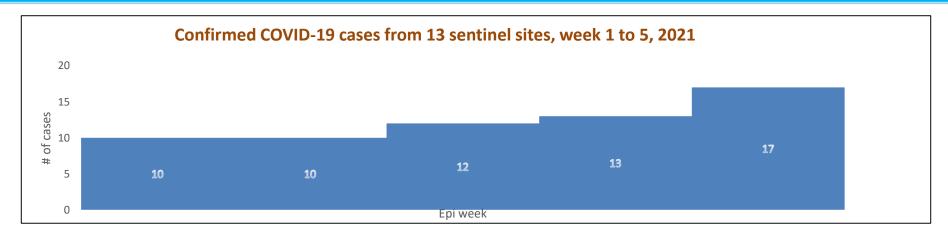


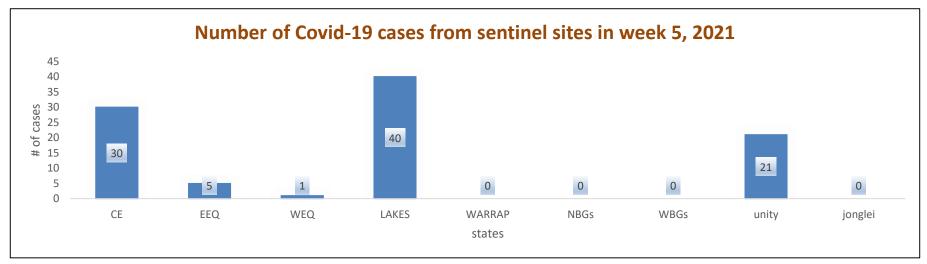


Major suspected outbreaks in South Sudan in 2020



## Routine Sentinel Surveillance | Human Influenza and Covid-19





There are currently 13 Covid-19 designated sentinel surveillance sites in Juba and States Hospitals that are collecting epidemiological data and samples from Covid-19/ILI/SARI cases. A total of 6900 samples have been collected in 2021 with 263 (3.8%) being positive for COVID-19 from sentinel sites.

## Response Suspect Epidemics; Curent Malaria trends 5, 2021

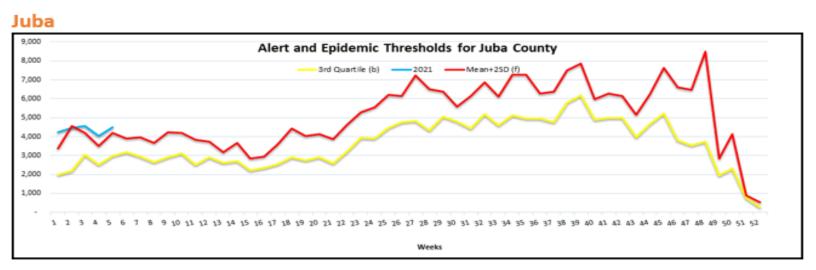


Malaria was the leading cause of morbidity and mortality, accounting for **50.2%** of all morbidities and **25.6%** of all mortalities this week.

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

- 1. CES (Juba, Yei)
- 2. NBGZ State ( Aweil Center)

In the PoC sites; malaria is one of the top cause of morbidity with respective proportional morbidity reported as Bentiu (6%); Malakal (6%); Juba (44%) and Wau (4%).



## 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:**

- 1. Heightened human RVF surveillance to detect and collect human samples from suspect cases given the risk of disease spillover.
- 2. Heightened risk communication to prevent exposure to potentially infectious animal products carcass; beef; arbutus products.
- 3. Regular updates on suspect cases (animal and human)
- 4. Regular coordination meetings involving human and animal stakeholders to review the situation and update the RVF preparedness and response plans and strategies.

# 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 5, 2021

- 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.

#### **Health Cluster Response:**

- An estimated 1 066 000 people in 47 counties were affected by floods in South Sudan from 1 July 2020 to 31 January 2021.
- Some 495 000 people were affected in Jonglei
   State and the Greater Pibor Administrative Area,
   the worst affected areas.
- Flood-affected people's urgent needs included food and livelihood support, emergency shelter and non-food items (ES/NFI), water, sanitation and hygiene (WASH), health and protection services.
- Flood-response activities were considerably constrained by persistent heavy rains, infrastructure damage and reduced physical accessibility, funding constraints, and insecurity.
- The COVID-19 emergency response depleted ES/NFI and WASH core pipeline stocks. Delays in replenishing core pipelines due to border and travel restrictions resulted in delayed flood response.

## **Response to Public Health Emergencies** (1)



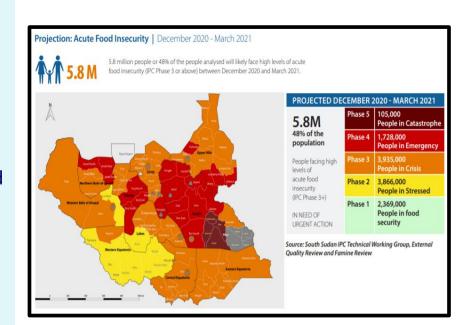
#### Food Insecurity, week 5, 2021

The 2021 Humanitarian Needs Overview South Sudan was released on 26 January showing some 8.3 million people (nearly 70 percent of the population) need some form of humanitarian assistance. This is an increase of 800 000 people (10 percent more) from the 7.5 million people in need in 2020.

Humanitarian needs are most concerning in the Greater Pibor Administrative Area with Pibor classified as the only county in catastrophic need. A total of 72 counties face extreme need while the remaining five are in severe need.

A second round of food distribution to 42,850 food insecure people in eight locations in Aweil South County commenced on 6 February 2021.

Nutrition partners established two static outpatients therapeutic Programme (OTPs) and two mobile nutrition units in Akobo where 5 000 children and pregnant mothers were screened and offered treatment and preventive packages for severe acute malnutrition and moderate acute malnutrition.



## Response to Public Health Emergencies (2)



## Food Insecurity, week 5, 2021

#### **Health Cluster Response in IPC 5 Counties:**

- The health cluster partners continue to scale up health response by ensuring access to the primary health services across the six 'Priority 1'counties through mobile and static facilities. During the past two weeks, over 20 000 consultations were conducted for various morbidities across the six counties.
- The outbreak prevention measures by various partners and programs are ongoing as well. The
  ongoing oral cholera vaccine (OCV) campaign targeting 93 250 people in Pibor, Gumuruk, Verteth,
  and Lekuangule ended on 21 February 2021. During the campaign, 59,001 individuals received their
  second OCV dose and another 37,316 individuals received their second OCV dose.
- The Maternal Neonatal Tetanus Eradication (MNTE) efforts targeting 35,970 women age group 14-45 years in Pibor reached 29,270 (79% coverage).
- Second round of polio campaign in response to the circulating Vaccine-Derived Poliovirus type 2
  (cVDPV2) outbreak was planned to take place in Pibor, Tonj East, Tonj North and Tonj South. The
  second round of the polio campaign was implemented in Tonj South from 16th to 20th February
  2021 (data awaited) but could not take place in Tonj East and Tonj North due to insecurity. In Pibor,
  the polio campaign will commence immediately after the cholera vaccination campaign.
- Cholera preparedness and readiness measures are ongoing in Pibor, Akobo and other counties bordering Ethiopia where there is an active cholera outbreak.
- WHO emergency health kits delivered to partners and county health departments in Pibor, Akobo,
   Tonj South, Tonj North and Aweil South
- A new consignment severe acute malnutrition with medical complication (SAM/MC) kits have reached Juba.
- No outbreaks have been reported in the counties.

## **Epidemiologic details (1)**



- As of 14<sup>th</sup> Feb, 2021 the country has reported 38 cVDPV2 from AFP cases, 16 from contacts and 2 from Environmental surveillance.
- All states have reported a case with surveillance activities being intensified and deployment of Mcking's consultants (5), ISTOPs (13) for added supervision along with over 400 personnel engaged at different levels in the Programme.
- The date of onset for the first cases was on 11/06/2020, while the most recent case was on 13/09/2020, of note is that no new cases reported have dates of onset after campaigns in that area.
- Fifteen new PV2 cases (5 AFP, 10 Contacts) were notified in the week 3 2021 involving 3 states

	cVDPV2	cVDPV2	
States Hubs	cases	Contacts	Total
Central Equatoria	4	0	4
Eastern Equatoria	1	0	1
Jonglei	1	0	1
Lakes	3	4	7
Northern Bahr El Ghazal	3	3	6
Unity	1	2	3
Upper Nile	1	0	1
Warrap	16	2	18
Western Bahr Ghazal	7	3	10
Western Equatoria	1	2	3
Total	38	16	54

## Supplemental Immunization details (2)



- Focus was on conducting a rapid, quantity campaign with mOPV2, enhancing surveillance through better coordination mechanism under the leadership of MOH.
- A total of 44 and 35 counties are in the phase1a and b mOP2 reactive campaign, with implementation of phase 2 commencing on 8 Dec 2020

#### Phase 1a: mOPV2 Result November 2020

States	Total Population	Target (OPV)	Children Immunized	OPV Doses used	% Coverage	Vaccine Wastage	PCE
Lakes	1,255,414	263,637	262,896	282,220	100%	6.8	90
Northern Bahr Ghazal	1,251,100	262,731	290,452	304,990	111%	4.8	92
Unity	1,546,148	324,691	256,580	276,200	79%	7.1	87
Upper Nile	612,520	128,629	125,964	137,140	98%	8.1	98
Warrap	1,539,553	323,306	319,419	339,100	99%	5.8	94
Western Bahr Ghazal	579,623	121,721	104,203	117,880	86%	11.6	76
Western Equatoria	650,463	136,597	130,312	138,069	95%	5.6	83
Grand Total	7,434,821	1,561,312	1,489,826	1,595,600	95%	6.6	90

#### Phase 1a: mOPV2 Result December 2020

States	Total Population	Target (OPV)	Total Children Immunized	mOPV2 Doses used	% Coverage	Vaccine Wastage rate	PCE by FM (%)
Central Equatoria	1,430,847	300,478	255,984	289,920	85%	11.7	94
Eastern Equatoria	1,492,725	313,472	277,588	307,400	89%	9.7	94
Western Equatoria	1,046,345	219,732	215,263	223,302	98%	3.6	91
Jonglei	1,758,786	369,345	308,755	330,700	84%	6.6	NA
Grand Total	5,728,703	1,203,028	1,057,590	1,151,322	88%	8.1	92

The second round will be conducted from 16 Feb 2021 targeting 2.8 million children under 5 years of age with an assessment of outbreak response in March 2021



## Response | Summary of major ongoing outbreaks in 2020 and 2021



Aetiological agent			New	Cumulative				
	Location (county)	Date first reported	cases since last bulletin	cases to date (attack rate %)	e (attack	Vaccinatio n	Health promotion	WASH
Ongoing epide	mics							
Hepatitis E	Bentiu PoC	03/01/2018	3	422 (0.007)	Yes	No	Yes	Yes
cVDPV2	13 counties	11/06/2020	NA	38	Yes	Yes	Yes	Yes
		18/09/2020						



## Bacteriology lab updates 2021

Epi-week	County (no. of samples)	Specimen tested (n)	Sample type	Suspected diseases	Lab Results	Comment
52	Bor South	2	stool	Cholera	No Growth for all enteric pathogens	
1	Juba	1	stool	Cholera	Growth for <i>E Coli</i>	
1	Juba	1	stool	Cholera	No Growth for <i>V.</i> <i>Cholerae</i>	
1	Ibba	1	stool	Cholera	No Growth	
1	Rumbek East	1	CSF	Meningitis	No Growth	
1	Aweil Centre	1	stool	Shigellosis	Growth of <i>Shigella Spp</i>	
2	Abyei (Agok)	1	stool	Cholera	Growth for non <i>V. Cholerae</i>	
5	Ibba	2	stool	Cholera	Growth for <i>E.Coli</i>	E.coli normally cause diarrhea in children < 5
5	Gogrial west	7	stool	Cholera	No Growth for <i>V.</i> <i>Cholerae</i>	



Measles outbreaks confirmed in 2020

■8 counties – Tonj East, Magwi, Bor, Kapoeta East, Tonj

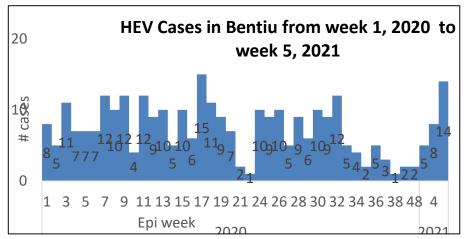
South, Wau and Pibor

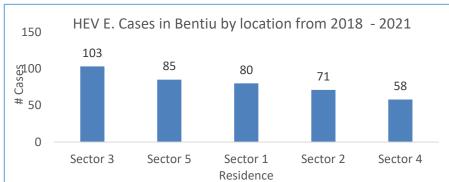
■ No new outbreak confirmed in 2021





## Hepatitis E, Bentiu PoC (1)

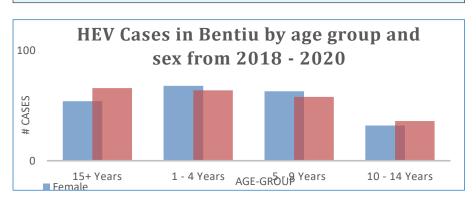




Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	132		132	30%	0%	30%
10 - 14 Years	68		68	15%	0%	45%
15+ Years	117	3	120	27%	3%	73%
5 - 9 Years	119	2	121	27%	2%	100%
Grand Total	436	5	441	100%	0.01	

#### **Descriptive epidemiology**

- The persistent transmission of HEV in Bentiu PoC continues with 441 cases since beginning of 2019
- There were (14) new cases reported in week 5, 2021
- 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 (73%) 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 5, 2021; there were 441 cases of HEV in Bentiu PoC including 5 deaths (CFR 0.011%)
- There is an upsurge of HEV cases since the beginning of 2021. There-fore calls for review to establish and address the WASH gaps.



## 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
- There is an upsurge of HEV cases since the beginning of 2021. This therefore calls for review to establish and address the WASH gaps.



## 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	Ibba	25/1/2020	0	55 (0.36)	Yes	Ye	es	Yes	



## **OCV Updates in Bor and Pibor**

## **Bor:**

- Oral cholera campaign was conducted in Bor where over 63,000 (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 71,852 (89%) people (one year and above) were covered.

## **Pibor:**

- OCV campaign in Pibor (1<sup>st</sup> round) started on 16<sup>th</sup> January 2021 targeting 93, 250 people one year and above. Total of 57, 960 (82,25% coverage) individuals were vaccinated against cholera in Pibor, Lekuangule, Verteth and Gumuruk.
- 2<sup>nd</sup> round start dates (targeting 93,250 individuals one year and above) will commence on 14 February 2021

## **EBOLA VIRUS DISEASE (EVD)**

7<sup>th</sup> Feb 2021



## DRC EVD Updates; New Outbreak

- On 7 February 2021, WHO was informed about a confirmed case of EVD in the Democratic Republic of the Congo. The epidemic was announced on 7 February 2021 by the Minister of Health of DRC
- On **6 February 2021**, INRB (Institut National pour la Recherche Biomedicale) Butembo laboratory confirmed EVD from a sample sent from the Biena Health Zone.
- The case was a 42 years old female farmer from Masoya health area, Biena health zone in Butembo who is a wife of an EVD survivor with the date of onset of symptoms on 25 January 2021.
- Her husband had 2 last negative sperm tests on 6 September and 29 November 2020 during the follow-up of the recoveries.

## **Response activities:**

- Response ongoing include the organization of crisis committee and deployment of support team from Goma to Butembo,
- Line listing of contacts, disinfection of sites, and shipment of samples to INRB Goma laboratory.
- Priority one countries need to consider undertaking a rapid risk assessment and prepare their EVD IMST as necessary.

## Undiagnosed disease (suspected VHF) in Tanzania:

- On 7 February 2021, WHO was informed about an undiagnosed disease in the United Republic of Tanzania.
- There are reports of an Ebola-like outbreak in Chunya District, Mbeya Region,
   Southern Tanzania.
- So far 15 people have died reportedly due to the undiagnosed disease in this district. Moreover, 50 more patients are reportedly battling this disease.
- Reported symptoms include vomiting of blood.
- The Government has sent officials in the area to investigate, and a more comprehensive report is expected in the coming days.
- Currently, there is no additional information on the detailed epidemiological profile of
  the cases including age, gender, date of onset of symptoms, the start date of the
  outbreak, possible exposure, travel history, type of laboratory samples collected and
  associated results, list of differential diagnosis considered for this, the total number of
  cases with the undiagnosed disease in the area, response activities
  planned/implemented.
- A request for verification has been sent to WHO/ AFRO and more information is still to come.

# **COVID-19 Updates**



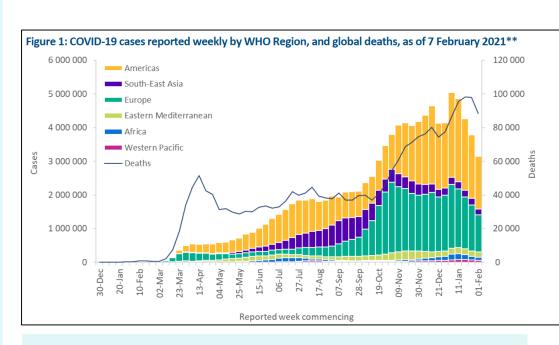


## **COVID-19 Virus Situation Summary**



## Situation update as of 7 Feb, 2020

- The COVID-19 pandemic initial cases were detected in Wuhan China
- Globally >105 429 382 million
   cases (>2 302 614 deaths)
- Africa >2 655 316 million
   cases (>65 736 deaths)

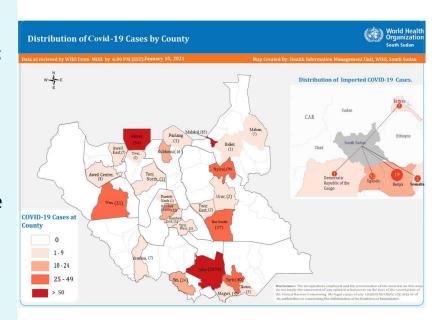


WHO: https://www.who.int/health-topics/coronavirus

## COVID-19 Response in South Sudan as of 7th Feb, 2021



- 4,609 confirmed COVID-19 cases in South Sudan; > 85% in Juba with 66 deaths and a case fatality rate (CFR) of 1.43%. Total 10,616 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
- COVID-19 cases have increased since the beginning of 2021. South Sudan is currently experiencing the second wave of COVID-19 transmission with PCR test positivity rates rising from 2.7% in week 1 of 2021 to 17.9% in week 6 of 2021.
- A monthlong partial lockdown imposed on 3 Feb 2021 that entails a ban on social gatherings, closure of schools and other institutions; entertainment places and limiting the number of passengers in public vehicles.



# Overall Conclusions and Recommendations



## Conclusion

- The overall IDSR and EWARN reporting performance in week 5, 2021 is above the target of 80%. (9) states were above 80%
- 4,609 confirmed COVID-19 cases in South Sudan; >85% in Juba with 66 deaths (CFR of 1.4%). Total 10,534 contacts identified, quarantined, & undergoing follow up
- A total of 1,835 COVID-19 alerts have been investigated with 1,730 (94.2%) being verified
- With eight outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- No measles outbreak conformed in 2021.
- 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



#### This bulletin is produced by the Ministry of Health with Technical support from WHO

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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









