South Sudan

Integrated Disease surveillance and response (IDSR)

Epidemiological Bulletin Week 12, 2021 (March 22- March 28)



Major epidemiological highlights in week 12 highlights of 2021



- In week 12, 2021 IDSR reporting timeliness was 78% and completeness was 93% at health facility level. EWARN reporting timeliness was 85% and completeness was 97%
- Of the 102 alerts in week 12, 2021; 93% were verified 7% were risk assessed and 0% required a response. Malaria (25), AWD (32), ARI (10) measles (2) and bloody diarrhea (23) were the most frequent alerts in week 12, 2021
- Ongoing rubella outbreak confirmed in Tambura county, WES.
- Malaria remains the top cause of morbidity and accounted for 49,348 cases (46.7% of OPD cases)
- A total of 2,272 COVID-19 alerts have been investigated with 2,165 (95.2%) being verified. Total of 10,103 COVID-19 confirmed cases and 109 deaths, CFR of 1.07%
- Other hazards include floods in over 47 counties; malaria in 2 counties and HEV in Bentiu PoC.

SURVEILLANCE PERFORMANCE



For the Integrated Disease Surveillance (IDSR) network and Early warning alert and response network (EWARN)



IDSR timeliness performance at State level for week 12 & 11 of 2021



Completeness States Ranking	States	Number of reporting sites	No. of HFs Reported on Time in WK 12	Timeliness Percentage of WK 12	No. of HFs Reported on Time in WK 11	Timeliness Percentage of WK 11
1st	WES	213	212	100%	212	100%
2nd	NBGZ	131	111	85%	116	89%
3rd	CES	117	99	85%	107	91%
4th	Jonglei	101	84	83%	67	66%
5th	WBGZ	78	57	73%	47	60%
6th	EES	142	100	70%	82	58%
7th	Upper Nile	122	83	68%	88	72%
8th	Unity	94	63	67%	71	76%
9th	Lakes	113	75	66%	99	88%
10th	Warrap	119	73	61%	98	82%
	South Sudan	1230	957	78%	987	80%

 KEY
 <60%</th>
 Poor

 61%-79%
 Fair

 80%-99%
 Good

 100%
 Excellent

The timeliness of IDSR reporting (supported by EWARS mobile) at health facility level in week 12 was 80% compared to 0% in week 11. 5 states were above the target of 80% with highest reporting rate in WES Reporting challenges: Insecurity, internet access challenges and lack of network.

IDSR completeness performance at State level for week 12 & 11 of 2021



Completeness States Ranking	States	Number of reporting sites	No. of HFs Reported regardless of time in WK 12	Completeness Percentage of WK 12	RANAHAA	Completeness Percentage of WK 11
1st	Lakes	113	113	100%	105	93%
2nd	WES	213	212	100%	212	100%
3rd	Jonglei	101	99	98%	82	81%
4th	CES	117	112	96%	111	95%
5th	WBGZ	78	73	94%	76	97%
6th	Unity	94	87	93%	87	93%
7th	NBGZ	131	121	92%	120	92%
8th	EES	142	125	88%	114	80%
9th	Upper Nile	122	106	87%	98	80%
10th	Warrap	119	93	78%	99	83%
	South Sudan	1230	1141	93%	1104	90%

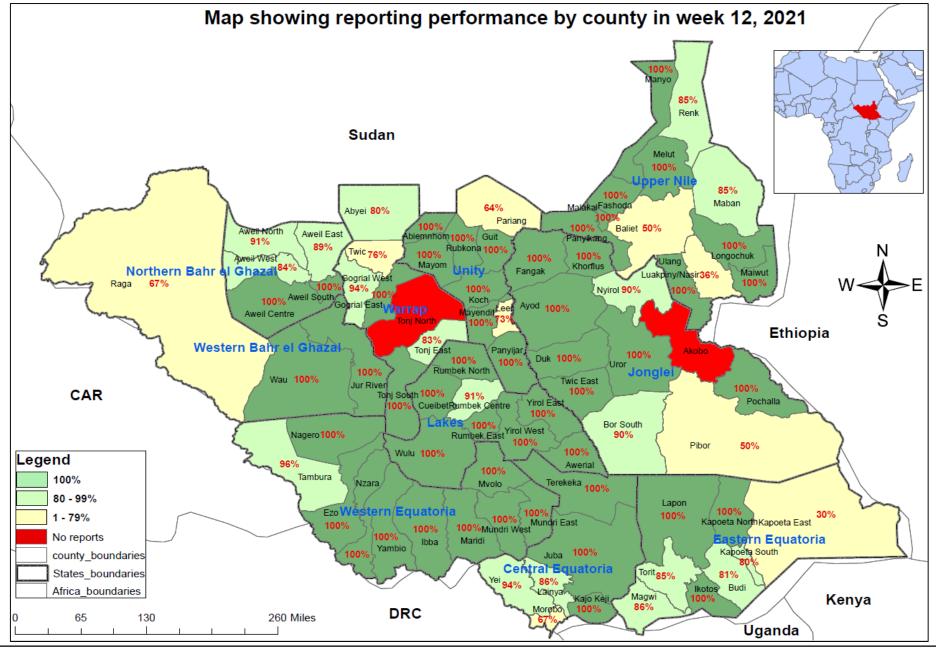
 KEY
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 Poor

 61%-79%
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 Good

 100%
 Excellent

The completeness of IDSR reporting (supported by EWARS mobile) at health facility level was 93% in week 12 compared 90% in week 11. All states were above the target of 80% with highest reporting rate in Lakes Reporting challenges: Insecurity, internet access challenges and lack of network.



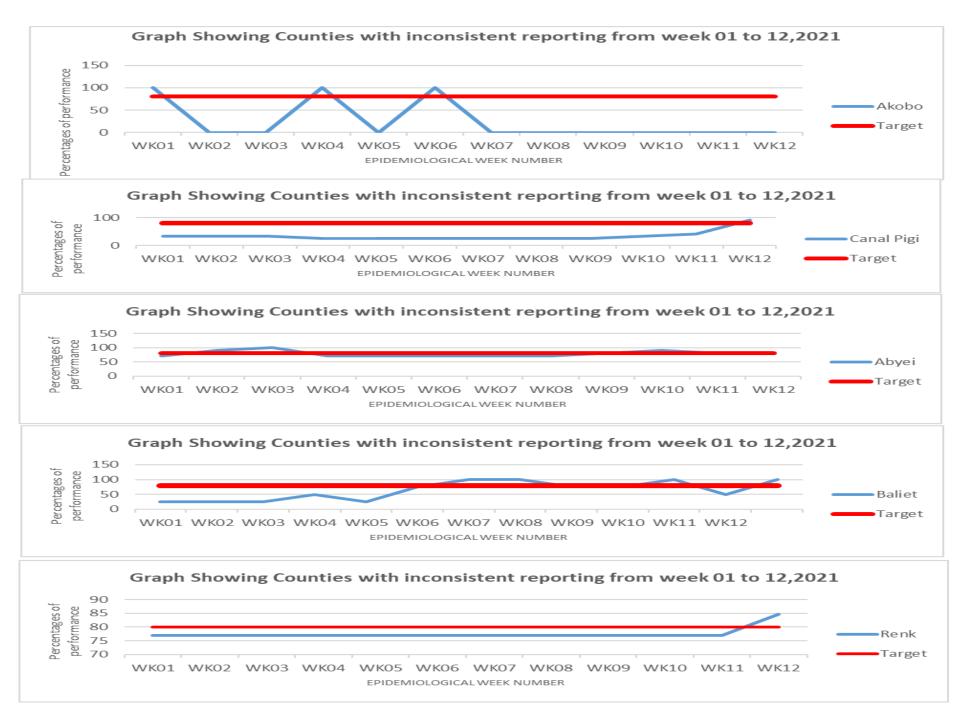
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Surveillance: EWARS performance indicator by partner for week 12 of 2021



Partner	HFs	Repo	rting	Perfor	mance
PARTER	Number of reporting sites	# of reports received on Time	No. of HFs Reported regardless of time	Timeliness	Completeness
Medicair	2	2	2	100%	100%
World Relief	2	2	2	100%	100%
CMD	1	1	1	100%	100%
IOM	12	12	12	100%	100%
RHS	1	1	1	100%	100%
HFO	2	2	2	100%	100%
IMC	6	6	6	100%	100%
GOAL	2	2	2	100%	100%
TADO	2	2	2	100%	100%
HFD	6	6	6	100%	100%
UNIDOR	2	2	2	100%	100%
MSF-E	6	6	6	100%	100%
Medair	2	2	2	100%	100%
IRC	1	1	1	100%	100%
НАА	6	6	6	100%	100%
TRI-SS	2	1	2	50%	100%
MSF-H	5	2	5	40%	100%
SSHCO	1	0	1	0%	100%
ALIMA	3	0	3	0%	100%
UNH	2	0	0	0%	0%
TOTAL	66	56	64	85%	97%

Completeness was 97% and timeliness was 85% for weekly reporting in week 12, 2021 for partner-supported clinics serving IDP sites.



EVENT-BASED SURVEILLANCE



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





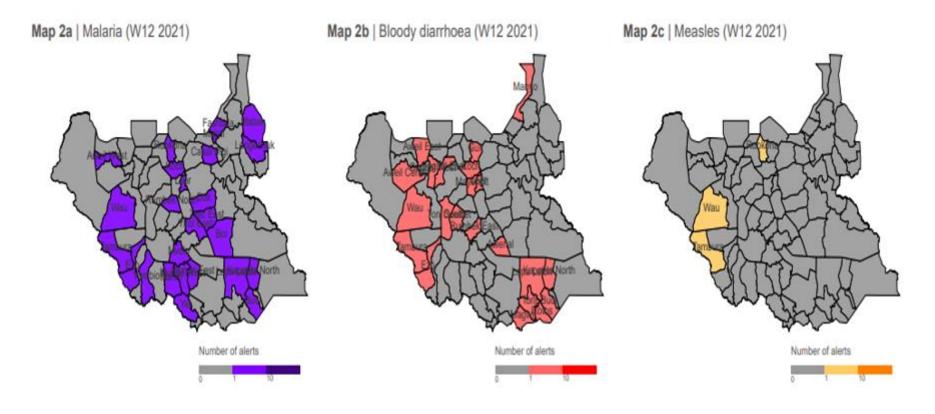
State	Acute jaundice syndrome	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	Bloody Diarrhoea	Malaria	Measles	Covid-19	Total alerts
CES		1	3		1			5
EES		1	5	8	3			17
Lakes				1				1
Unity	1		1	5	4	1	2	14
Upper Nile		4	5		4			13
Warrap		1		5			2	8
WBGZ		2	6	3	3	1	2	16
WES		1	12	1	10	1	3	28
Total alerts	1	10	32	23	25	2	9	102

During this week:

- 10 ARI alerts: 1 from CES sample was collected and tested positive for COVID-19, 1 from EES sample was collected and tested
 Positive for COVID-19 in the state Sentinel Site, 4 from Upper Nile state sample collected and all tested positive for COVID-19, 1
 from Warrap state sample collected and tested positive for COVID-19, 2 from WBGZ Sample collected .1 from WES sample
 collected and tested positive for COVID-19.
- 32 AWD alerts: 3 from CES, 5 from EES, 1 from Unity, 5 from Upper Nile, 6 from WBGZ State, 12 from WES; state RRT have been engaged to verify and collect samples.
- 23 ABD alerts: 8 from EES,1 from Lakes State, 5 from Unity,5 from Warrap, 3 from WBGZ, 1 from WES; state RRT have been engaged to verify and collect samples.
- 25 Malaria alerts: 1 from CES, 3 from EES, 4 from Unity, 4 from Upper Nile, 3 from WBGZ, 10 from WES all these are due to the high increase of malaria cases in the Country.
- 1 AJS alert: 1 from Unity State, reported in an area with confirmed cases of Hepatitis E virus.
- 9 COVID-19 alerts: 2 from Unity, 2 from Warrap, 2 from WBGZ and 3 from WES all tested positive for COVID-19
- 3 Measles alerts: 1 from Wau, 1 from Unity State in Bentiu PoC which was reported by the clinician and sample was collected for further investigation and the other 1 is from WES in Tambura Hospital sample collected and sent to National Public Health Lab for investigation.

Alert: Map of key disease alerts by county of week 12 of 2021





W12	Cumu	lative (2021)
0	5	Low risk
7	7	Medium risk
4	40	High risk
7	31	Very high risk

93%	83%	% verified
0%	0%	% auto-discarded
7%	3%	% risk assessed
0%	2%	% requiring a response

SUSPECTED OUTBREAKS





Major suspected outbreaks in South Sudan in 2020



Response | Suspect Epidemics; Curent Malaria trends 12, 2021



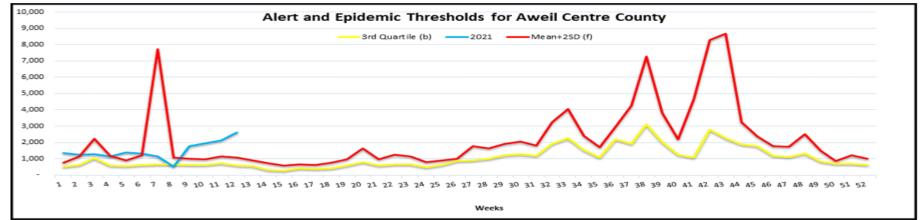
Malaria was the leading cause of morbidity and mortality, accounting for **46.7**% of all morbidities and **85.8**% of all mortalities this week.

There were 2 county with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

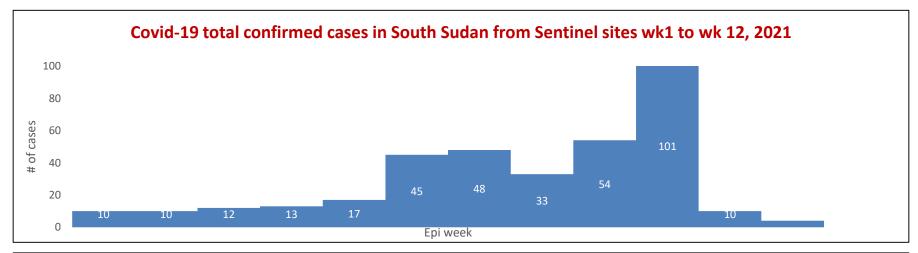
- 1. NBGZ State (Aweil Center)
- 2. WBGZ State (Jur River)

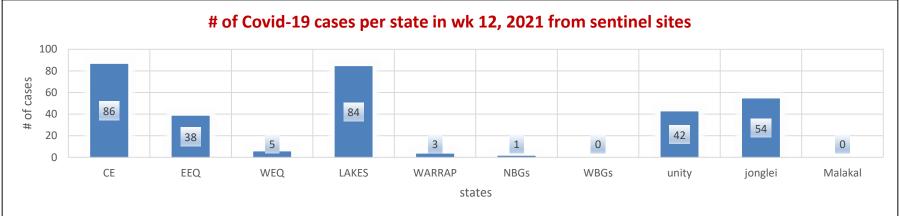
In the PoC sites; malaria is one of the top cause of morbidity with respective proportional morbidity reported as Bentiu (5%); Malakal (44%); Juba (32%) and Wau (4%) PoCs of OPD consultations, respectively.





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 7671 samples have been
collected in 2021 with 527 (6.8%) being positive for COVID-19 from sentinel sites.

Guinea Worms Rumors and Suspects by County, Week 11

Rumors

- 731 rumors were reported.
 - 724 from humans
 - 7 from animals (Dogs)
- 100% of rumors were investigated
 - 100% of rumors (n = 731) were investigated within 24 hours.

Reporting Method

All the rumors (n = 731, 100%) were reported through the SSGWEP surveillance structure.

• Self-report: 303

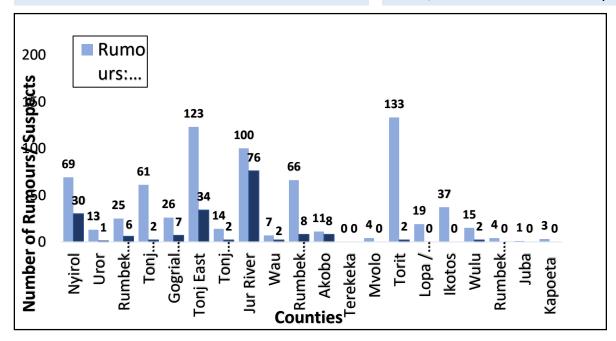
VV/AS: 150

• FO/PSO: 125

Other: 153

Hotline Rumors: One rumor reported (Juba Na Bari)

IDSR/EWARS: No rumors reported through the IDSR/EWARS.



Suspects:

- 180 suspects were detected.
 - 178 human suspects.
 - 2 animal suspect (All dogs) reported from Udici Payam-Jur River County.
- 25% of the rumors reported were suspects.





ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS





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





Update on floods and response

To reduce the impact of the predicted flooding in 2021 during the rainy season, rehabilitation of dykes in Bor South and Twic East counties is ongoing. The rehabilitation works on the dykes are expected to be completed by the end of April 2021. Further, prepositioning of critical humanitarian supplies is going on while the roads are still passable.

Humanitarian responses scale up for locations affected by unseasonal flooding have been recommended. The affected locations include Nyirol (1, 600 people), Fangak (27 000 people in New Fangak and 48 000 people in Old Fangak), Panyikang (24 000 people) and Fashoda (11 000) people).

Recommendations:

Partners to update their preparedness and contingency plans for floods and malaria and to preposition supplies.

Response to Public Health Emergencies (1)



Food Insecurity (1)

- The Integrated Food Security Phase Classification (IPC) report released in December 2020 projected that over 810,000 people will be in Crisis or worse levels of food insecurity out of which over 108 000 people will be in IPC Phase 5 catastrophe in the six most affected counties.
- The scaling up of the humanitarian response will continue into the lean season (May-July) during which the rainy season and expected flooding may worsen the situation. The ongoing multisectoral response continues to face multiple access challenges owing to insecurity, limited resources, and limited functional health facilities.

Health Cluster Response in IPC 5 Counties:

- The humanitarian emergency occasioned by the severe food insecurity has been graded as a Grade 2 event through a grading teleconference call between the WHO country office, regional office and the headquarters.
- Additional resources and support from the regional and headquarters will be availed to the country office to further scale up the ongoing response.
- Efforts by health partners towards ensuring access to health services through both static and mobile are continuing across the six 'Priority 1'counties of Pibor, Akobo, Tonj East, Tonj South, Tonj North, and Aweil South. Over 128 196 consultations have been conducted by health facilities across the six counties since week 01 of 2021.

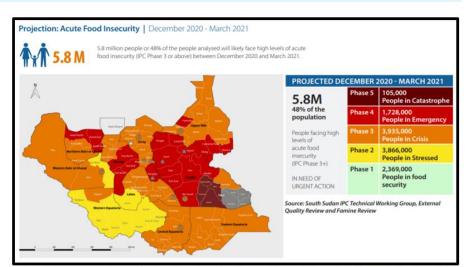
Response to Public Health Emergencies (2)



Food Insecurity (2)

Health Cluster Response in IPC 5 Counties:

- Prevention and preparedness to respond to potential infectious disease outbreaks in the severely food insecure and undernourished populations are paramount in averting excess morbidity and mortality during such emergencies. So far oral cholera vaccination campaigns have been done in four locations (Gumuruk, Pibor, Verteth and Lekuangule) in Pibor, Boma county will benefit from the campaign in the coming weeks.
- Further, alert investigation and sample collection and testing for cholera, measles and other epidemic-prone diseases are ongoing.

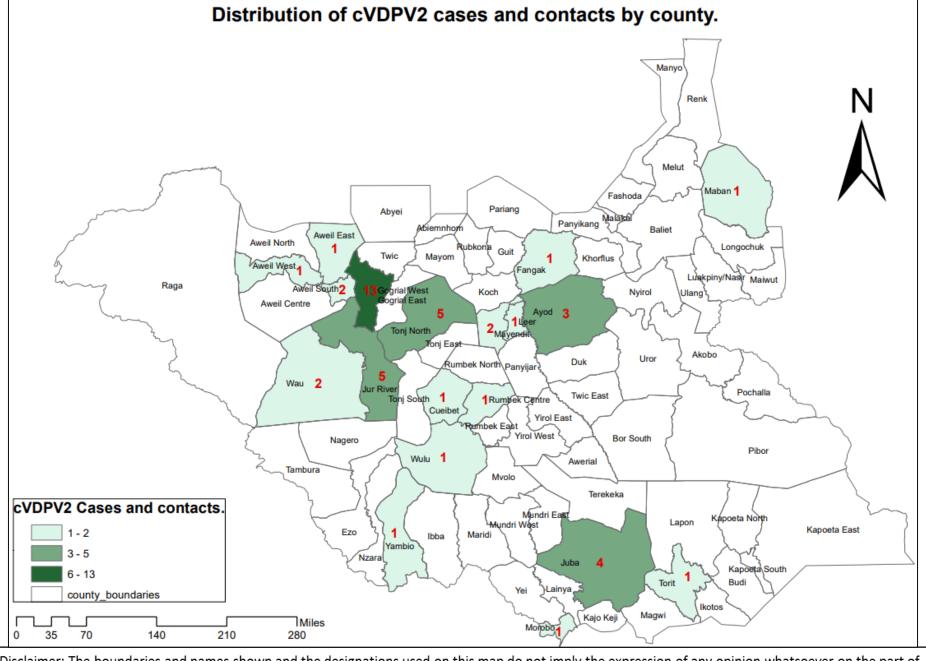


- The counties have also benefitted from two rounds of polio vaccination campaigns in response to the confirmed vaccine-derived poliovirus outbreak. However, the campaign in Tonj East could not be conducted because of insecurity in the area.
- Efforts towards improving routine immunization coverage are continuing in the IPC 5 priority counties. Aweil South, Tonj North and Tonj South have completed a round of Periodic Intensification of Routine Immunization (PIRI) to augment the routine immunization at the health facilities.
- Resource mobilization is continuing. WHO is supporting emergency partners in the six "Priority 1" counties with 164 interagency health kits (can support 227 000 people), 84 pneumonia kits, 10 severe acute malnutrition with medical complication (SAM/MC) kits, and 21 cholera investigation kits have been delivered to the responding partners.
- Weekly trends of the top infectious diseases are being monitored for potential upsurges and timely investigation.

Epidemiologic details; cVDPV2



- ☐ In the week under review, no new circulating Vaccine-Derived Polio Virus, type 2 (cVDPV2) case was reported. However, in the week under review 4 suspected PV2 cases were reported from case and contacts in Upper Nile (1 AFP cases) and Unity state (3 contacts)
- The number of cases reported cVDPV2 cases as of today remain the same (54) including cVDPV2 cases from contacts (21).
- This week no new cVDPV2 positive environmental samples were reported and hence the total number of cVDPV2 cases remain 5. The most recent positive environmental sample was collected on 1st December, 2020.
- The geographical distribution of cVDPV2 cases involves all 10 states in the country and 25 out of 80 counties have reported at least 1 case, with 20% of the cases from Warrap state.
- ☐ All cVDPV2 cases that have been reported so far have dates of onset of paralysis before nationwide campaign in February 2021.
- ☐ The date of onset for the first cases was on 11th June 2020 from Warrap state, while the most recent case was on 25th January from Juba, Central Equatoria state.
- Clinical and epidemiological investigation is underway for cases classified as compatible and for the new suspected PV2 cases reported in Upper Nil and Unity states..
- The average administrative coverage for all rounds is at 93.6%, while the average PCE coverage 90.3 %, however, there is a great disparity among states and counties.



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Response| Summary of major ongoing outbreaks in 2020 and 2021

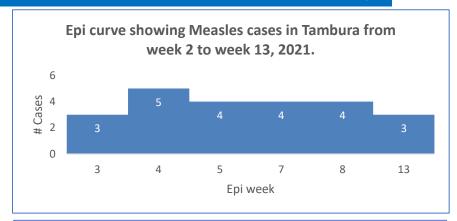


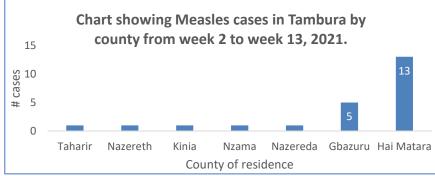
	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
Aetiological agent					Case management	Vaccination	Health promotion	WASH
Ongoing epide	mics							
Hepatitis E	Bentiu PoC	03/01/2018	9	545 (0.016)	Yes	No	Yes	Yes
cVDPV2	25 counties	11/06/2020 18/09/2020	0	54	Yes	Yes	Yes	Yes
Rubella	Tambura	11/1/2021	3	23 (0.13)	Yes	No	Yes	Yes

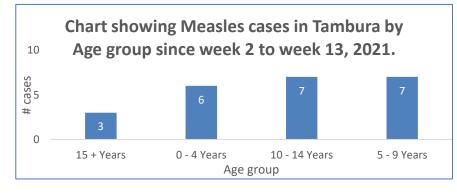




Confirmed Rubella outbreak in Tambura County







Descriptive epidemiology

- WES started to report cases of suspected Measles in week 2, 2021. Up to week 10, 2021 a total of 32 cases have been listed.
- 12 samples were collected for testing and only one tested measles IgM positive and 5 samples tested Rubella IgM positive
- There were (3) new case reported in week 13, 2021, total of 23 cases.
- No deaths were reported
- 57% are female and 43% are male.
- Age group 0- 9 years had the most cases with (68%).
- Most affected area is Hai Matara with 13 cases.

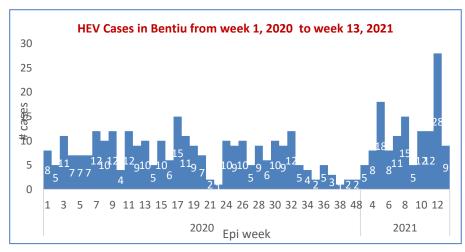
Response Actions:

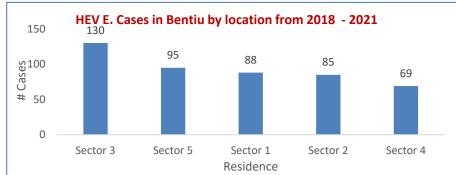
- Surveillance and line-listing are ongoing
- Case management is ongoing
- Active monitoring for occurrence of cases in women of childbearing age.

Age group	Cases	percentage	CUM. %
15 + Years	3	34%	34%
0 - 4 Years	6	34%	69%
10 - 14 Years	7	21%	90%
5 - 9 Years	7	10%	100%
Grand Total	23	100%	



Hepatitis E, Bentiu PoC (1)

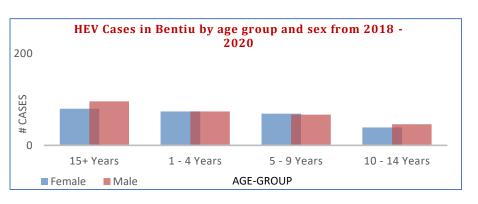




Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	148		148	27%	0%	27%
10 - 14 Years	85		85	16%	0%	43%
15+ Years	173	3	176	32%	2%	75%
5 - 9 Years	134	2	136	25%	1%	100%
Grand Total	540	5	545	100%	0.01	

Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 545 cases since beginning of 2019
- There were (9) new cases reported in week 13, 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 (68%) 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, 2021; there were 545 cases of HEV in Bentiu PoC including 5 deaths (CFR 0.9%)
- 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



	Location		New cases	Cumulative		Interventi	ons			
Aetiological agent	Location (county)	Date first reported	since last bulletin	cases to date (attack rate %)	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	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		

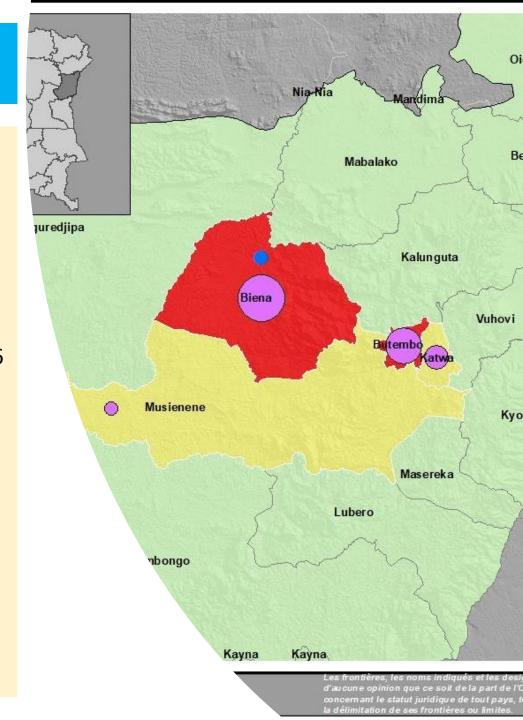


EBOLA VIRUS DISEASE (EVD)

DRC, North Kivu EVD Outbreak (23rd March 2021)

Cumulative data (23 March 2021)

- Zero confirmed cases reported in past 22 days.
- 42 day countdown commenced on 22 March (D. 41).
- In this outbreak/resurgence, 12 EVD cases were reported (11 confirmed, 1 probable). including 2 health workers, 6 deaths (CFR 50%) and 6 recoveries.
- 16/18 community deaths reported were swabbed and SDB performed.
- 4 HZ affected: Biena, Katwa, Musienene & Butembo.
- 1,763 vaccinated using experimental vaccine rVSV-ZEBOV-GP and 2,233 samples analyzed to date.
- On 23rd March, 99% (587/588) of alerts reported and 12% (70) validated.



EVD Outbreak in Guinea as of 24th March 2021

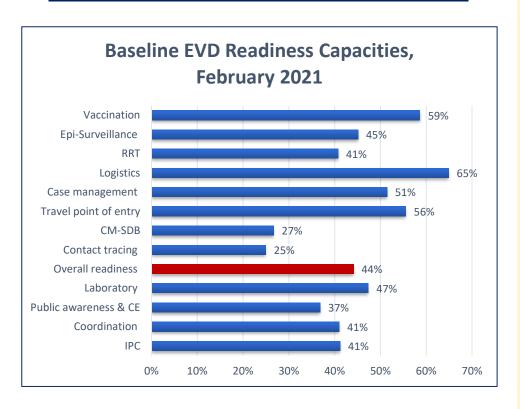
Cumulative figures – 24th March

- Zero newly confirmed case reported since 4th March (20 days)
- 42 day countdown commences on 24 March (D. 42)
- 9 contacts lost to follow up have been identified. All reported to be in good health
- 64% (54/84) of reported alerts investigation
- 18/19 (95%) contacts followed
- 18 total EVD cases reported (14 confirmed including 9 deaths (5 confirmed & 4 probable), 5 health workers and 1 traditional practitioner
- **9 recoveries** reported to date
- 4,225 vaccinated (288 high-risk contacts, 3495 contacts of contacts and 442 probable contacts) including 1718 frontline workers.



South Sudan EVD Preparedness Activities

Level of EVD preparedness



What is the next plan for South Sudan?

- Finalized the EVD preparedness checklist
- Finalized the risk assessment
- Finalized the 72 hours plan
- Prioritized activities based on the checklist
- Drafted EVD preparedness operational plan
- Drafted resource mobilization strategy
- Mapped potential donors

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



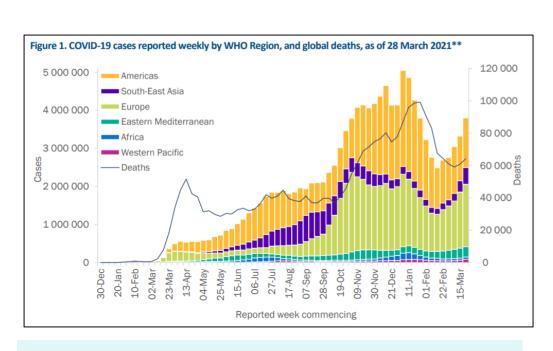


COVID-19 Virus Situation Summary



Situation update as of 30th March, 2020

- The COVID-19 pandemic initial cases were detected in Wuhan China
- Globally >126 372 442 million
 cases (>2 769 696 deaths)
- Africa >3 061 438 million
 cases (>77 446 deaths)



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

COVID-19 Response in South Sudan as of 21st March, 2021



- 10,103 confirmed COVID-19 cases in South Sudan; > 85% in Juba with 109 deaths and a case fatality rate (CFR) of 1.07%. Total 14,504 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 4.8% in week 12 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.

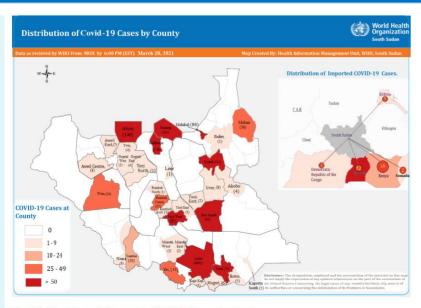


Figure 1. Map of cumulative reported COVID-19 cases, by county

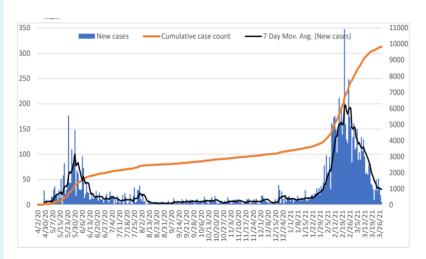


Figure 2. Epidemiological curve of reported cases through Week 12, showing new cases (blue bars), rolling 7-day average of reported cases (black line), and total cumulative reported cases (yellow line)

Overall Conclusions and Recommendations



Conclusion

- The overall IDSR and EWARN reporting performance in week 12, 2021 is above the target of 80%. (10) states were above 80%
- 10,103 confirmed COVID-19 cases in South Sudan; >85% in Juba with 106 deaths (CFR of 1.15%). Total 14,506 contacts identified, quarantined, & undergoing follow up
- A total of 2,321 COVID-19 alerts have been investigated with 2,209 (95.2%) being verified
- With eight outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- A new rubella outbreak confirmed in Tambura county
- 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



IDSR timeliness & completeness performance at county level for week 12 of 2021 (1)



STATE	COUNTY	SUPPORTING PARTNER	Number of reporting sites	No. of HFs Reported on Time in WK 12	Timeliness Percentage of WK 12	No. of HFs Reported regardless of time in WK 12	Completeness Percentage of WK 12		Completeness Percentage of WK 11
Lakes	Awerial	Doctors with Africa (CUAMM)	7	7	100%	7	100%	7	100%
Lakes	Yirol West	Doctors with Africa (CUAMM)	12	12	100%	12	100%	12	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%	9	100%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	15	100%	15	100%	15	100%
WBGZ	Wau	Cordaid	28	28	100%	28	100%	28	100%
WBGZ	Jur River	Cordaid	35	29	83%	35	100%	35	100%
Lakes	Wulu	Doctors with Africa (CUAMM)	14	11	79%	14	100%	14	100%
Lakes	Cueibet	Doctors with Africa (CUAMM)	15	9	60%	15	100%	15	100%
CES	Kajo Keji	SSUHA,GOAL,TRI- SS,IMA	17	10	59%	17	100%	17	100%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	0	0%	24	100%	24	100%
NBGZ	Aweil East	IRC,TADO	36	34	94%	36	100%	34	94%
CES	Juba	HLSS,SSHCO	46	42	91%	46	100%	45	98%
Lakes	Rumbek North	(CUAMM)	7	6	86%	7	100%	6	86%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	23	100%	23	100%	21	91%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	7	64%	11	100%	6	55%
CES	Yei	SSUHA	17	14	82%	16	94%	16	94%
NBGZ	Aweil North	HealthNetTPO,IHO	33	27	82%	30	91%	30	91%
CES	Terekeka	HealthNetTPO	20	17	85%	17	85%	17	85%
NBGZ	Aweil West	HealthNetTPO	37	26	70%	31	84%	32	86%
CES	Morobo	SSUHA,THESO,IMA	5	4	80%	4	80%	4	80%
CES	Lainya	SSUHA	16	12	75%	12	75%	12	75%
WBGZ	Raja	HealthNetTPO,ALIMA	15	0	0%	10	67%	13	87%

	STATE	COUNTY	SUPPORTING PARTNER	Number of reporting sites	No. of HFs Reported on Time in WK 12	Timeliness Percentage of WK 12	No. of HFs Reported regardless of time in 12	Completeness Percentage of WK 12	No. of HFs Reported regardless of time in WK 11	Completeness Percentage of WK 11
	Jonglei	Fangak	CMD,HFO	17	17	100%	17	100%	17	100%
	Jonglei	Pochalla	LIVEWELL	7	7	100%	7	100%	7	100%
	EES	Ikotos	HLSS	27	22	81%	27	100%	26	96%
	EES	Lopa Lafon	HLSS	18	15	83%	18	100%	11	61%
	Jonglei	Canal Pigi	IMC	11	10	91%	11	100%	3	27%
	EES	Kapoeta North	CCM	16	13	81%	15	94%	15	94%
	Jonglei	Nyirol	CMA,Malaria Consortium	10	9	90%	9	90%	8	80%
	EES	Budi	Cordaid	21	10	48%	19	90%	17	81%
	EES	Torit	Cordaid	20	17	85%	17	85%	17	85%
	EES	Magwi	HLSS	22	13	59%	18	82%	18	82%
	Jonglei	Ayod	CMD,EDA	15	12	80%	12	80%	12	80%
	EES	Kapoeta South	CCM	10	8	80%	8	80%	5	50%
	Jonglei	Duk	MDM + JDF	15	11	73%	11	73%	11	73%
	Jonglei	Twic East	MDM + JDF	11	8	73%	8	73%	0	0%
	Jonglei	Pibor	LIVEWELL,CRADA, MEDAIR,CARE	6	3	50%	3	50%	3	50%
	Jonglei	Bor	MDM + JDF,ACSO	35	7	20%	19	54%	21	60%
	EES	Kapoeta East	CCM	12	2	17%	3	25%	5	42%
	Jonglei	Uror	Nile Hope,Malaria Consortium	8	0	0%	2	25%	0	0%
	Jonglei	Akobo	Nile Hope,Malaria Consortium,World Relief	8	0	0%	0	0%	0	0%
I	Warrap	Toni North	CCM	14	0	0%	0	0%	9	64%

IDSR timeliness & completeness performance at county level for week 12 of 2021 (2)



ST	ATE	COUNTY	SUPPORTING PARTNER	Number of reporting sites	No. of HFs Reported on Time in WK 12	Timeliness Percentage of WK 12	No. of HFs Reported regardless of time in WK 12	Completeness Percentage of WK 12		Completeness Percentage of WK 11
Joi	nglei	Fangak	CMD,HFO	17	17	100%	17	100%	17	100%
Joi	nglei	Pochalla	LIVEWELL	7	7	100%	7	100%	7	100%
Е	ES	Ikotos	HLSS	27	22	81%	27	100%	26	96%
Joi	nglei	Canal Pigi	IMC	11	10	91%	11	100%	3	27%
Е	ES	Lopa Lafon	HLSS	18	15	83%	18	100%	11	61%
Е	ES	Kapoeta North	CCM	16	13	81%	15	94%	15	94%
Joi	nglei	Nyirol	CMA,Malaria Consortium	10	9	90%	9	90%	8	80%
E	ES	Budi	Cordaid	21	10	48%	19	90%	17	81%
E	ES	Torit	Cordaid	20	17	85%	17	85%	17	85%
E	ES	Magwi	HLSS	22	13	59%	18	82%	18	82%
Joi	nglei	Ayod	CMD,EDA	15	12	80%	12	80%	12	80%
Е	ES	Kapoeta South	CCM	10	8	80%	8	80%	5	50%
Joi	nglei	Duk	MDM + JDF	15	11	73%	11	73%	11	73%
Joi	nglei	Twic East	MDM + JDF	11	8	73%	8	73%	0	0%
Joi	nglei	Bor	MDM + JDF,ACSO	35	7	20%	19	54%	21	60%
Joi	nglei	Pibor	LIVEWELL,CRADA,MED AIR,CARE	6	3	50%	3	50%	3	50%
E	ES	Kapoeta East	CCM	12	2	17%	3	25%	5	42%
Joi	nglei	Uror	Nile Hope,Malaria Consortium	8	0	0%	2	25%	0	0%
Joi	nglei	Akobo	Nile Hope,Malaria Consortium,World Relief	8	0	0%	0	0%	0	0%

STATE	COUNTY	SUPPORTING PARTNER	Number of reporting sites	No. of HFs Reported on Time in WK 12	Timeliness Percentage of WK 12	No. of HFs Reported regardless of time in WK 12	Completeness Percentage of WK 12	No. of HFs Reported regardless of time in WK 11	Completeness Percentage of WK 11
Warrap	Tonj South	CCM	12	12	100%	12	100%	12	100%
Upper Nile	Manyo	CORDAID	10	10	100%	10	100%	10	100%
Upper Nile	Melut	WVI + RI	8	8	100%	8	100%	8	100%
Upper Nile	Panyikang	IMC	4	4	100%	4	100%	4	100%
Upper Nile	Longechuk	RI	9	9	100%	9	100%	9	100%
Upper Nile	Fashoda	CORDAID,HFD	18	13	72%	18	100%	18	100%
Upper Nile	Makal	IMC	7	5	71%	7	100%	7	100%
Warrap	Gogrial East	GOAL	15	0	0%	15	100%	15	100%
Upper Nile	Akoka	IMC	5	5	100%	5	100%	4	80%
Upper Nile	Maiwut	RI	5	4	80%	5	100%	0	0%
Warrap	Gogrial West	GOAL	31	29	94%	29	94%	31	100%
Upper Nile	Renk	WVI + RI	13	1	8%	11	85%	10	77%
Warrap	Tonj East	CCM	12	6	50%	10	83%	12	100%
Warrap	Abyei	AAA,Save the Children,MSF	10	7	70%	8	80%	8	80%
Upper Nile	Ulang	UNKEA,RI,TADO	14	9	64%	11	79%	9	64%
Warrap	Twic	GOAL	26	19	73%	19	73%	12	46%
Upper Nile	Maban	WVI,RI,Samarita ns Purse	17	9	53%	11	65%	13	76%
Upper Nile	Baliet	IMC	4	2	50%	2	50%	1	25%
Upper Nile	Luakpiny Nasir	UNKEA,RI	15	4	27%	5	33%	5	33%
Warrap	Tonj North	CCM	14	0	0%	0	0%	9	64%

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

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Notes

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More information can be found at http://ewars-project.org









