# South Sudan

Integrated Disease surveillance and response (IDSR)

Epidemiological Bulletin Week 13, 2021 (March 29- April 04)



- SUL/2
- In week 13, 2021 IDSR reporting timeliness was 68% and completeness was 91% at health facility level. EWARN reporting timeliness was 85% and completeness was 95%
- Of the 102 alerts in week 13, 2021. Malaria (30), AWD (28), ARI (17) measles (3) and bloody diarrhea (12) were the most frequent alerts in week 13, 2021
- Ongoing rubella outbreak confirmed in Tambura county, WES.
- Malaria remains the top cause of morbidity and accounted for 47,896 cases (48.4% of OPD cases)
- A total of 2,413 COVID-19 alerts have been investigated with 2,296 (95.2%) being verified. Total of 10,281 COVID-19 confirmed cases and 113 deaths, CFR of 1.09%
- Other hazards include floods in over 47 counties; malaria in 3 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 13 & 12 of 2021



Completeness States Ranking	States	Number of reporting sites	No. of HFs Reported on Time in WK 13	Timeliness Percentage of WK 13	No. of HFs Reported on Time in WK 12	Timeliness Percentage of WK 12
1st	WES	213	213	100%	212	100%
2nd	NBGZ	131	114	87%	111	85%
3rd	Warrap	119	94	79%	73	61%
4th	Upper Nile	122	83	68%	83	68%
5th	WBGZ	78	53	68%	57	73%
6th	Jonglei	101	65	64%	84	83%
7th	Lakes	113	69	61%	75	66%
8th	Unity	94	56	60%	63	67%
9th	CES	117	49	42%	99	85%
10th	EES	142	46	32%	100	70%
	South Sudan	1230	842	68%	957	78%

KEY

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

The timeliness of IDSR reporting (supported by EWARS mobile) at health facility level in week 13 was 68% compared to 78% in week 12. 4 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 13 & 12 of 2021

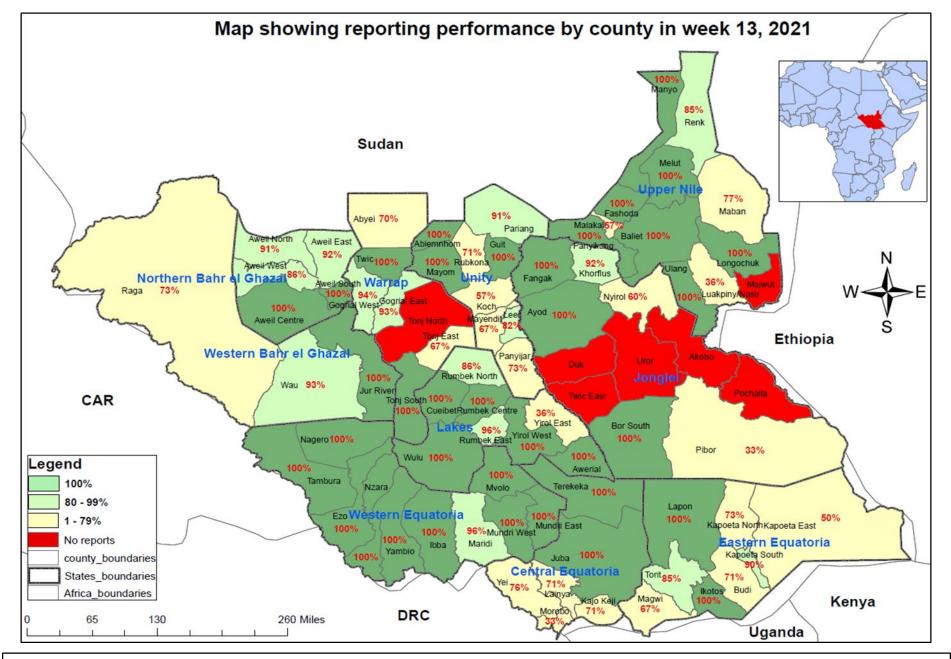


Completeness States Ranking	States		No. of HFs Reported regardless of time in WK 13	Completeness Percentage of WK 13	No. of HFs Reported regardless of time in WK 12	Completeness Percentage of WK 12
1st	WES	213	213	100%	212	100%
2nd	Lakes	113	105	93%	113	100%
3rd	WBGZ	78	72	92%	73	94%
4th	NBGZ	131 120		92%	121	92%
5th	Warrap	119	109	92%	110	92%
6th	EES	142	129	91%	132	93%
7th	CES	117	104	89%	112	96%
8th	Upper Nile	122	106	87%	108	89%
9th	Unity	94	81	86%	90	96%
10th	Jonglei	101	81	80%	100	99%
	South Sudan	1230	1120	91%	1171	95%

KEY

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

The completeness of IDSR reporting (supported by EWARS mobile) at health facility level was 91% in week 13 compared 95% in week 12. All states were above the target of 80% with highest reporting rate in WES **Reporting challenges**: Insecurity, internet access challenges and lack of network.



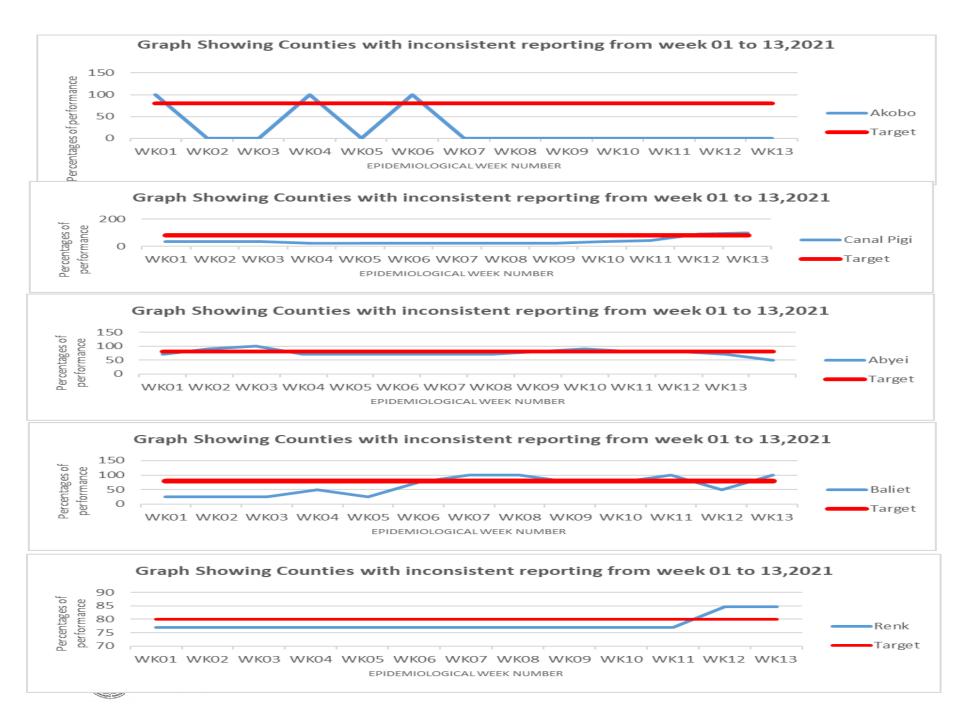
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#### Surveillance: EWARS performance indicator by partner for week 13 of 2021



Partner	HFs	Repo	orting	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%	
HAA	6	6	6	100%	100%	
UNH	2	0	2	0%	100%	
SSHCO	1	0	1	0%	100%	
ALIMA	3	0	3	0%	100%	
MSF-H	5	2	3	40%	60%	
TRI-SS	2	1	1	50%	50%	
TOTAL	66	56	63	85%	95%	

Completeness was 95% and timeliness was 85% for weekly reporting in week 13, 2021 for partner-supported clinics serving IDP sites.





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	EBS	Covid-19	Total alerts
CES		2	1			1			4
EES		1	3	1	1				6
Jonglei				1					1
NBGZ		1	2	1					4
Unity	1	1	1	1	3	1	1	2	11
Upper Nile		9	5	3	4	1			22
Warrap		1	4	3	2			1	11
WBGZ		1	3	2	4			1	11
WES		1	9		16			2	28
Total alerts	1	17	28	12	30	3	1	6	98

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

- 17 ARI alerts: 2 from CES sample was collected and tested positive for COVID-19, 1 from EES sample was collected and tested for COVID-19 in the state Sentinel Site, 1 NBGZ sample was collected and tested positive for COVID-19, 1 from Unity State sample collected and tested for COVID-19, 9 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, 1 from WBGZ Sample collected .1 from WES sample collected and tested positive for COVID-19.
- 28 AWD alerts: 1 from CES ,3 from EES , 2 from NBGZ, 1 from Unity, 4 from Upper Nile, 3 from WBGZ State, 9 from WES; samples were collected from Unity and WES while state RRT have been engaged to verify and collect samples in the other states.
- 12 ABD alerts: 1 from EES, 1 from Jonglei State, 1 from NBGZ, 1 from Unity, 3 from Warrap, 2 from WBGZ, 3 from Upper Nile State; state RRT have been engaged to verify and collect samples.
- 30 Malaria alerts:, 1 from EES, 3 from Unity, 4 from Upper Nile, 4 from WBGZ, 16 from WES all these are due to the high increase of malaria cases in the Country.
- 1 AJS alerts: 1 from Unity State reported in an area with confirmed cases of Hepatitis E virus.
- 6 COVID-19 alerts: 2 from Unity, 1 from Warrap, 1 from WBGZ and 2 from WES all tested positive for COVID-19
- 2 Measles alerts: 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 Upper Nile Manyo,, Adhidwoi phcc sample collected for confirmation.1 CES in Juba County, Usratuna PHCC.



# Major suspected outbreaks in South Sudan in 2020



\*

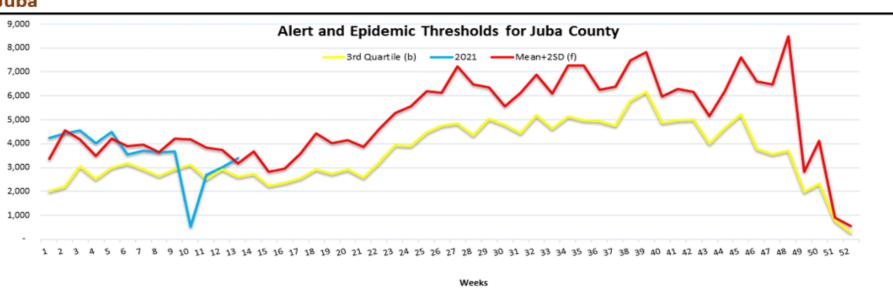
Malaria was the leading cause of morbidity and mortality, accounting for **48.4%** of all

morbidities and **21.1%** of all mortalities this week.

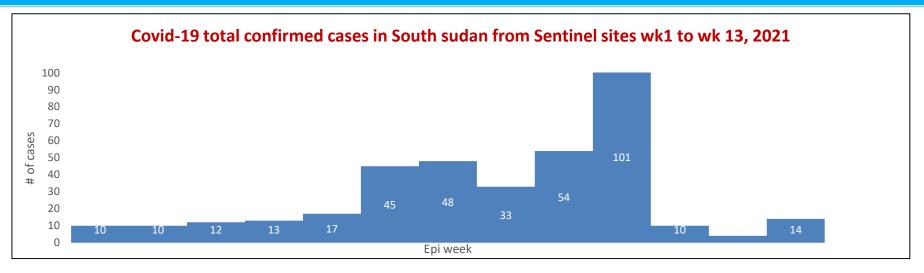
There were 2 county with malaria trends that exceeded the threshold (third quartile of

trends for the period 2013-2017) and these include the following:

- 1. NBGZ State (Aweil Center)
- 2. CE State (Juba)
- 3. Warrap State (Twic Mayardit)



#### Juba



Number of Covid-19 cases per state in week 13, 2021 from sentinel sites



• 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 7701 samples have been collected in 2021 with 541 (7.0%) being positive for COVID-19 from sentinel sites.

# 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.

# \*

#### 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.



#### 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.

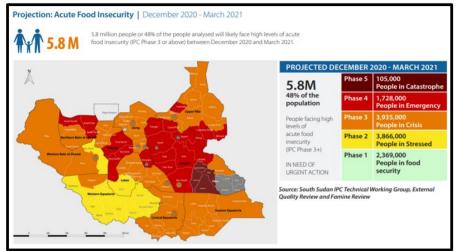


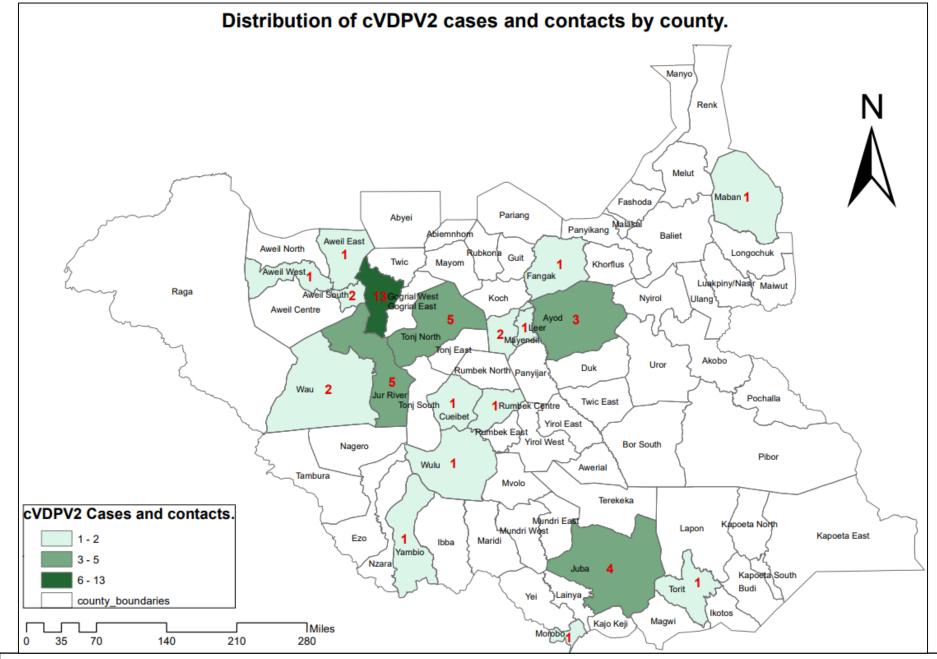
Figure 1: population estimates by IPC Phase and State based on the compilation of the South Sudan IPC Technical Working Group

- 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 for all rounds is at 93.6%, while the average prove for all rounds is at 93.6%, while the average prove for all rounds is at 93.6%, while the average prove for all rounds is at 93.6%, while the average prove for all rounds is at 93.6%, while the average prove for all rounds is at 93.6%, while the average prove for all rounds is at 93.6\%.



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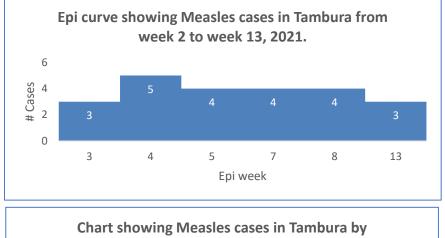
			New	Cumulative		Interventions				
Aetiological agent	Location (county)	Date first reported	cases since last bulletin	cases to date (attack rate %)	Case management	Vaccination	Health promotion	WASH		
Ongoing epide	mics									
Hepatitis E	Bentiu PoC	03/01/2018	7	556 (0.013)	Yes	No	Yes	Yes		
cVDPV2	25 counties	11/06/2020	0	54	Yes	Yes	Yes	Yes		
		18/09/2020								
Rubella	Tambura	11/1/2021	3	23 (0.13)	Yes	No	Yes	Yes		



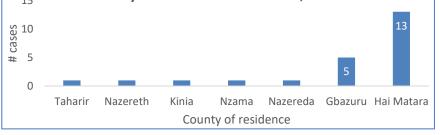
#### **Response**

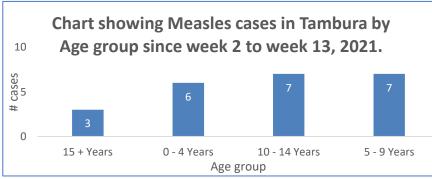
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#### Confirmed Rubella outbreak in Tambura County



15 county from week 2 to week 13, 2021.





#### **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.

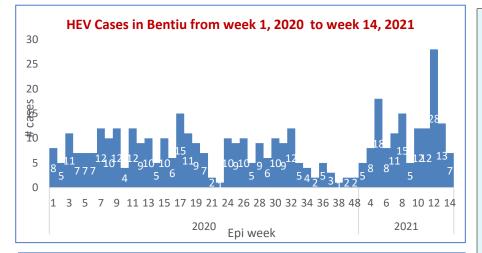
#### **Response Actions:**

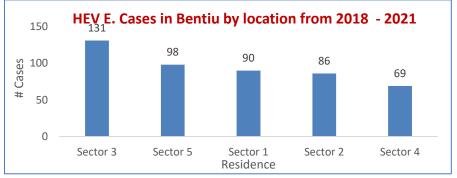
- Surveillance and line-listing are ongoing
- Case management is ongoing
- Active monitoring for occurrence of cases in women of childbearing age.

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)

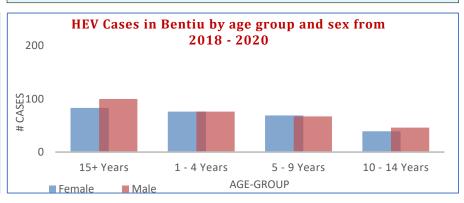




Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	152		152	27%	0%	27%
10 - 14 Years	85		85	15%	0%	43%
15+ Years	180	3	183	33%	2%	76%
5 - 9 Years	134	2	136	24%	1%	100%
Grand Total	551	5	556	100%	0.01	

#### **Descriptive epidemiology**

- The persistent transmission of HEV in Bentiu PoC continues with **556** cases since beginning of 2019
- There were (7) new cases reported in week 14, 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 (67%) 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 14, 2021; there were 556 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.



#### Recommendations

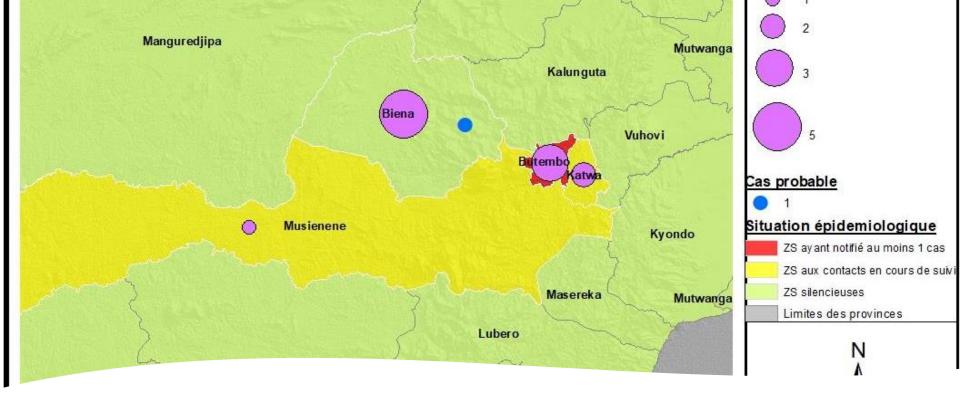
- Supportive case management guided by the HEV protocol is ongoing
- KEV messages on HEV prevention should continue within the community through HPs, CHWs and Kondial Radio
- With current COVID -19 Pandemic Outbreak, WASH partners to increase the coverage of hand washing facilities within the PoCs community.
- 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.

						Interventions						
Aetiological agent	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Case management	Vaccination	Health promotion	WASH				
Controlled epide	mics											
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	Ν	0	Yes				
Measles	Pibor	27/1/2020	NR	355 (0.0028)	Yes	Ye	25	Yes				
Measles	Wau	5/1/2020	NR	39 (0.051)	Yes	Ye	25	Yes				
Measles	Ibba	25/1/2020	0	55 (0.36)	Yes	Ye	25	Yes				



# **EBOLA VIRUS DISEASE (EVD)**





DRC, North Kivu EVD Outbreak ( 1<sup>st</sup> April, 2021)

- The last newly confirmed case was reported on the 1<sup>st</sup> March and discharged on the 23<sup>rd</sup> March following a second negative test result on 22<sup>nd</sup> March. The 23<sup>rd</sup> March marked the 1st of the 42 day countdown to 0.
- 1 April is day 10/42 (33 days remaining).
- Cumulative data:
  - 12 cases reported (11 confirmed and 1 probable) including 6 deaths and 6 recoveries.
  - 6 health areas in three health zones in North Kivu Province, DRC were affected.
  - On 1 April 607 alerts reported, 99 validated and 100% of these investigated.

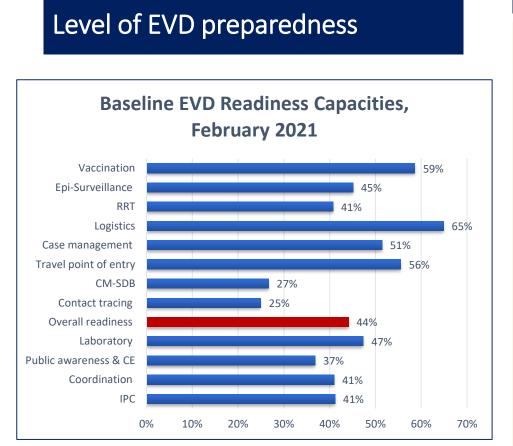


• One new and 3 probable cases reported on the 1<sup>st</sup> April following investigation of three suspect community deaths.

- This case (following negotiation) tested positive by Genexpert on first test. The case has since fled to the community and currently location unknown.
- High level of community resistance
- These cases had consulted a traditional healer before death (in Lola, a prefecture on Cote d'Ivoire border).
- Cumulative data:
- 22 cases reported (15 confirmed & 7 probable) including 12 deaths (5 confirmed), 9 recoveries and 1 positive case).

EVD Outbreak in Guinea as of 1<sup>st</sup> April 2021

### South Sudan EVD Preparedness Activities



# 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

# **COVID-19 Updates**



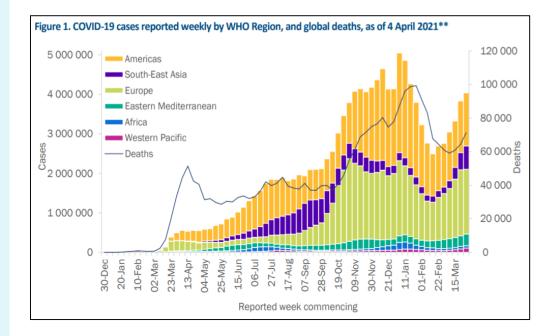


# **COVID-19 Virus Situation Summary**



### Situation update as of 4<sup>th</sup> April, 2020

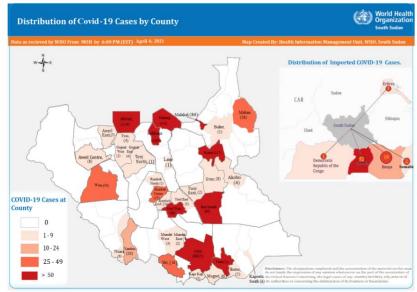
- The COVID-19 pandemic
  - initial cases were detected in
  - Wuhan China
- Globally >130 459 184 million
  - cases (>2 842 325 deaths)
- Africa >3 120 296 million
  - cases (>78 523 deaths)



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

### COVID-19 Response in South Sudan as of 4<sup>th</sup> April, 2021

- 10,281 confirmed COVID-19 cases in South Sudan; > 85% in Juba with 113 deaths and a case fatality rate (CFR) of 1.07%. Total 15,214 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 3.5% 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.





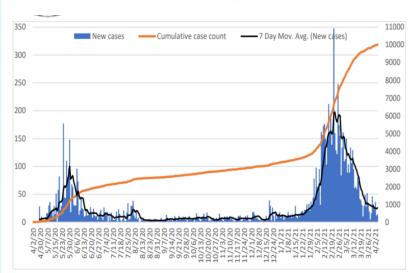


Figure 2. Epidemiological curve of reported cases through Week 13, showing new cases (blue bars), rolling 7-day average of reported cases (black line), and total cumulative reported cases (yellow line)



# Overall Conclusions and Recommendations



### Conclusion

- The overall IDSR and EWARN reporting performance in week 13, 2021 is above the target of 80%. (9) states were above 80%
- 10,281 confirmed COVID-19 cases in South Sudan; >85% in Juba with 113 deaths (CFR of 1.15%). Total 15,214 contacts identified, quarantined, & undergoing follow up
- A total of 2,413 COVID-19 alerts have been investigated with 2,296 (95.2%) being verified
- With eight outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- Ongoing 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.

- 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-weeklydisease-surveillance-bulletin-2020



### IDSR timeliness & completeness performance at county level for week 13 of 2021 (1)



STATE	COUNTY	SUPPORTING Partner	Number of reporting sites	No. of HFs Reported on Time in WK 13		regardless of time in WK	Completenes s Percentage of WK 13	regardless of time in	Completeness Percentage of WK 12	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
Lakes	Cueibet	Doctors with Africa	15	15	100%	13 15	100%	WK 12 15	100%	Jonglei	Fangak	CMD,HFO	17	17	100%	17	100%	17	100%
Lakes	Awerial	(CUAMM) Doctors with Africa	7	7		7				Jonglei	Canal Pigi	IMC	12	8	67%	12	100%	11	92%
Lakes	Rumbek	(CUAMM) Doctors with Africa	1		100%	1	100%	7	100%	EES	Ikotos	HLSS	27	18	67%	27	100%	27	100%
Lakes	Centre	(CUAMM)	23	23	100%	23	100%	23	100%	EES	Lopa Lafon	HLSS	18	11	61%	18	100%	18	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%	9	100%	EES	Kapoeta North	CCM	16	0	0%	15	94%	15	94%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	15	100%	15	100%	15	100%	EES	Kapoeta South	CCM	10	0	0%	9	90%	8	80%
WBGZ	Jur River	Cordaid	35	28	80%	35	100%	35	100%	EES	Torit	Cordaid	20	1	5%	17	85%	17	85%
CES	Juba	HLSS,SSHCO	46	1	2%	46	100%	46	100%					40					
Lakes	Wulu	Doctors with Africa (CUAMM)	14	0	0%	14	100%	14	100%	Jonglei	Ayod	CMD,EDA	15	12	80%	12	80%	12	80%
Lakes	Yirol West	Doctors with Africa (CUAMM)	12	0	0%	12	100%	12	100%	EES	Budi Kapoeta	Cordaid	21	9	43%	16	76%	19	90%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	23	96%	23	96%	24	100%	EES	East	CCM	12	0	0%	9	75%	3	25%
NBGZ	Aweil East	IRC,TADO	36	32	89%	34	94%	36	100%	EES	Magwi	HLSS	22	7	32%	15	68%	18	82%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	1	9%	4	36%	11	100%	Jonglei	Bor	MDM + JDF,ACSO	35	21	60%	21	60%	19	54%
WBGZ	Wau	Cordaid	28	19	68%	26	93%	28	100%	Jonglei	Nyirol	CMA,Malaria Consortium	10	5	50%	6	60%	9	90%
Lakes	Rumbek North	(CUAMM)	7	0	0%	6	86%	7	100%	Jonglei	Pibor	LIVEWELL,CRADA	6	2	33%	2	33%	3	50%
CES	Kajo Keji	SSUHA,GOAL,TRI- SS.IMA	17	7	41%	13	76%	17	100%			,MEDAIR,CARE	45						
CES	Yei	SSUHA	17	12	71%	13	76%	16	94%	Jonglei	Duk	MDM + JDF	15	0	0%	2	13%	11	73%
NBGZ	Aweil North	HealthNetTPO,IHO	33	30	91%	30	91%	30	91%	Jonglei	Pochalla	LIVEWELL	7	0	0%	0	0%	7	100%
CES	Terekeka	HealthNetTPO	20	17	85%	17	85%	17	85%	Jonglei	Akobo	Nile Hope,Malaria Consortium,World	8	0	0%	0	0%	0	0%
NBGZ	Aweil West	HealthNetTPO	37	28	76%	32	86%	31	84%			Relief							
CES	Morobo	SSUHA, THESO, IMA	5	2	40%	2	40%	4	80%	Jonglei	Twic East	MDM + JDF	11	0	0%	0	0%	8	73%
CES	Lainya	SSUHA	16	10	63%	10	63%	12	75%	Jonglei	Uror	Nile Hope,Malaria Consortium	8	0	0%	0	0%	2	25%
WBGZ	Raja	HealthNetTPO,ALIMA	15	6	40%	11	73%	10	67%	Warrap	Tonj North	CCM	14	0	0%	0	0%	9	64%

### IDSR timeliness & completeness performance at county level for week 13 of 2021 (2)



STATE	COUNTY	SUPPORTING Partner	Number of reporting sites	No. of HFs Reported on Time in WK 13			Completenes is Percentage of WK 13		Completeness Percentage of WK 12	STATE	COUNTY	SUPPORTING Partner	Number of reporting sites	No. of HFs Reported on Time in WK 13	Timeliness Percentage of WK 13	No. of HFs Reported regardless of time in WK 13	Completeness Percentage of WK 13	No. of HFs Reported regardless of time in WK 12	Completeness Percentage of WK 12
Unity	Guit	CHADO	7	7	100%	7	100%	7	100%	Warrap	Tonj South	CCM	12	12	100%	12	100%	12	100%
WES	Nzara	World Vision International	20	20	100%	20	100%	20	100%	Upper Nile	Manyo	CORDAID	10	10	100%	10	100%	10	100%
WES	Nagero	World Vision International	10	10	100%	10	100%	10	100%	Upper Nile	Fashoda	CORDAID, HFD	18	18	100%	18	100%	18	100%
WES	Mundri West	CUAMM	21	21	100%	21	100%	21	100%	Upper Nile	Melut	WVI + RI	8	8	100%	8	100%	8	100%
WES	lbba	AMREF	11	11	100%	11	100%	11	100%	Upper Nile	Panyikang	IMC	4	4	100%	4	100%	4	100%
WES	Mundri East	CUAMM	19	19	100%	19	100%	19	100%	Upper Nile	Longechuk	RI	9	0	0%	9	100%	9	100%
WES	Yambio	World Vision International	42	42	100%	42	100%	42	100%	Warrap	Gogrial West	GOAL	31	29	94%	31	100%	29	94%
WES	Ezo	World Vision International	27	27	100%	27	100%	27	100%	Upper Nile	Baliet	IMC	4	3	75%	4	100%	2	50%
WES	Mvolo	CUAMM	11	11	100%	11	100%		100%	Warrap	Twic	GOAL	26	25	96%	25	96%	19	73%
Unity	Abiemnhom	Cordaid	4	3	75%	4	100%	4	100%	Warrap	Gogrial East	GOAL	15	14	93%	14	93%	15	100%
-										Upper Nile	Renk	WVI + RI	13	11	85%	11	85%	11	85%
WES	Maridi	AMREF	26	25	96%	25	96%	26	100%	Upper Nile	Akoka	IMC	5	4	80%	4	80%	5	100%
Unity	Mayendit	CASS	12	8	67%	8	67%	12	100%	Upper Nile	Ulang	UNKEA,RI,TADO	14	10	71%	11	79%	11	79%
Unity	Panyijiar	IRC	15	9	60%	11	73%	15	100%	Upper Nile	Makal	IMC	7	1	14%	5	71%	7	100%
Unity	Koch	CRADA,IRC.	7	4	57%	4	57%	7	100%	Warrap	Abyei	AAA,Save the Children,MSF	10	6	60%	7	70%	8	80%
WES	Tambura	World Vision International	28	27	96%	27	96%	25	89%	Warrap	Tonj East	CCM	12	8	67%	8	67%	10	83%
Unity	Mayom	CORAID,Samaritan's Purse	14	13	93%	13	93%	13	93%	Upper Nile	Maban	WVI,RI,CORDAID	17	9	53%	10	59%	11	65%
Unity	Leer	UNIDOR	11	8	73%	9	82%	8	73%	Upper Nile	Luakpiny Nasir	UNKEA,RI	15	5	33%	5	33%	5	33%
Unity	Pariang	CARE International	11	2	18%	10	91%	7	64%	Warrap	Tonj North	CCM	14	0	0%	0	0%	0	0%
Unity	Rubkona	Cordaid, IRC, IOM, MSF	15	2	13%	10	67%	14	93%	Upper Nile	Maiwut	RI	5	0	0%	0	0%	5	100%

#### 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.

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