

South Sudan: Cholera Outbreak Situation Report

Situation report: No. 38

Date of onset of outbreak: 22 February 2023

Reporting date: 15 April 2023

Data Source: State Ministry of Health and National Public Health Laboratory



Cholera response | Cumulative figures from 22 February to 15 April 2023

1004

Cases

2

Death

0.20%

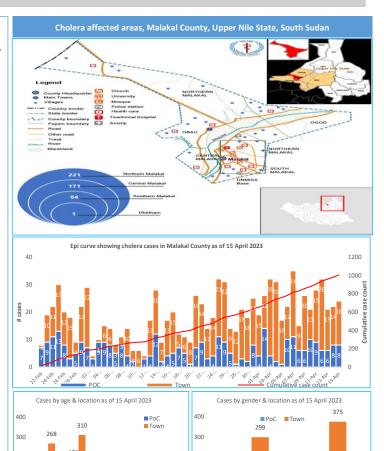
CFR

3

Grade

Key Weekly Highlights as of 15 April 2023

- Twenty-four (24) new cholera cases have been reported in the last 24 hrs.
- Zero new death recorded in the past 24 hours.
- Cumulatively, a total of 1004 cholera cases and 2 deaths (CFR- 0.20%) has been recorded since the onset of the outbreak.
- Overall, 537(53%) of the cases are males and 467(47%) are females.
- Children of age 1 4 years old are the most affected accounting for 486(48%) of the total cases reported followed by <1 years old 359(36%).
- Oral Cholera vaccination campaign commenced on 16 March 2023 targeting 66,121 individuals aged 1 year and above in the POC and Malakal town.
- Cumulatively, 54,538 people have been vaccinated (Malakal town and POC) with OCV achieving 82% coverage.
- The current cholera outbreak is localized in Malakal Upper Nile State on the side boarding Sudan.



200



Key Interventions

Coordination

- National and State Cholera Taskforce continue to meet regularly to provide operational and strategic guidance to the ongoing cholera outbreak response.
- Coordination meeting with MOH, WHO, and partners to provide technical support to the response activities.
- Daily information sharing with the high-level cholera task force led by the state minister of health.
- A multisectoral National and State RRT continues to provide epidemiological investigation and technical support to the response interventions in Malakal County.

Surveillance and reporting

- WHO and partners continue to update and support data verification, harmonization, and analysis across the response pillars.
- With technical support from WHO, a joint active case search is being conducted by both National and State RRT teams at health facility and community levels in Malakal County.
- Surveillance activities are being heightened in at-risk counties bordering Malakal in Upper Nile State.

Case management

- Seven (07) new cases admitted in the CTU and eight (08) cases were discharged.
- MSF-Spain is supporting case management at the CTU in Malakal town and POC.
- A technical team consisting of MOH and WHO Country Office has been deployed to Malakal to support ongoing response.
- The state ministry of health with the support of IMC continues to conduct triage in health facilities for cholera and refer cases to Malakal Teaching Hospital.
- The SMOH with support from WHO and partners continues to set up handwashing facilities at established ORP sites in the affected areas.
- The SMOH with support from WHO continues to preposition standardized Case Management charts and cholera Case Definition to CTUs (HFs, ORPs, and CTUs/CTCs).

Infection Prevention & Control/WASH

- The blanket chlorination campaign of water points and households was started on 4th April 2023 and led by the Malakal municipality council with the participation of WASH/health partners is ongoing.
- Ongoing Mass Aqua tab and Pur purification (Point of Use Water Treatment) at Malakal northern and eastern blocks in coordination and partnership with WASH



- partners (UNICEF, WVI, SSRC, SI) and WASH Cluster SNC Upper Nile targeting 5,000HH.
- IOM continues to operate and maintain the 748 latrine stances regularly, including disinfection with chlorine (concentration: 0.5%). Noted that the number of functioning latrines was reduced due to the lack of space. IOM will continue engaging with community leaders on identifying available spaces for new construction.
- Maintenance of FRC in SWAT systems at a level of 0.4-0.5mg/l at Taps stands across 6 water points.

Risk Communication & Community Engagement (RCCE)

- Community radio talk shows and jingles spots are ongoing.
- RCCE TWG developed a communication plan to guide the implementation of targeted communication activities aimed at changing hygiene behavior and practices for the prevention and control of cholera.
- Ongoing daily Hygiene promotion activities on key cholera messages (causes, symptoms, and prevention measures), and airing of pre-recorded cholera preventive measures (Nile FM Radio).

Laboratory

- One hundred eight (108) samples have been tested on RDT since the onset of the outbreak with nineteen (19) samples testing positive on RDT and eighty-nine (89) testing negative.
- Cumulatively, sixty-nine (69) samples have been cultured at both NPHL (22) and Malakal teaching hospital (47). Four (04) isolates non-O1 and non-O139 have been shipped to NICD South Africa for further confirmation.
- Three (03) lab technicians (1 from NPHL and 2 from WHO) have been deployed to support sample collection and management in Malakal.
- Ongoing support to the laboratory capacity of partners (MSF, IOM, and IMC) to conduct RDT for cholera cases.

Oral Cholera Vaccination (OCV)

- The oral cholera vaccination campaign was officially launched on 16 March 2023.
- Some 54,538 people have been vaccinated both in the POC and Malakal town with a coverage of 82 % achieved so far.
- WHO submitted a new request for 200,000 doses of OCV to the International Coordination Group (ICG) for additional oral cholera vaccines.

Logistics and supplies

• WHO hired 2 additional vehicles to support response activities in Malakal.



Challenges

- Inadequate access to safe and clean water due to limited WASH supplies.
- Sub-optimal risk communication and community engagement in cholera affected high-risk locations.
- Inadequate funding for partners to respond to the cholera outbreak in Malakal.
- Lack of designated ambulance to facilitate referral of cholera cases and designated vehicle for the safe dignified burial (SDB) team.
- Identification of personnel to be trained safe and dignified burial (SDB).
- Overcrowding in the POC due to the continued influx of IDPs poses is a major challenge to the limited WASH facilities in the POC.

Way forward

- Follow up on 4 Isolates shipped to NICD-South Africa.
- Provision of adequate clean and safe water, especially in the cholera outbreak and high-risk locations.
- Accelerate RCCE interventions at POC and Malakal town.
- Finalize the cholera response plan and budget for resource mobilization.
- Provide a designated ambulance to support the referral of cholera cases.
- Identify and train safe and dignified burial (SDB) teams.
- Training of mobile sanitation community committee on basic sanitation topics and messages prior to general clean-up campaign to maintain clean environment.
- Coordination with MSF on WASH NFI distribution targeting the affected cases after discharge.

Table 1: Implementing partners by pillar

PILLAR	PARTNER SUPPORTING
Coordination	WHO/OCHA
Surveillance	WHO, MSF, IMC &IOM
Case Management	MSF, IMC, IOM, WHO
Water, sanitation, and hygiene (WASH)	IOM, ICRC, WVI, UNICEF,WHO
Infection prevention & control and Safe and dignified burial	WHO, MSF, DRC, IOM, SSRC
Risk communication and Community Engagement (RCCE)	UNICEF, IOM/CCCM, SSRC, DRC,WHO
Port of Entry (PoE)	IOM/DTM,WHO
Oral cholera vaccine (OCV)	WHO, IMC, MSF- Spain, UNICEF, IOM

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