

South Sudan Ministry of Health

Integrated Disease surveillance and response (IDSR)



Epidemiological Bulletin Week 18, 2023 (01-07 May)





- In week 18, 2023, the IDSR reporting timeliness and completeness were 80% and 89% respectively and timeliness and completeness for EWARN sites were at 83% and 89% respectively
- A total of 83 alerts were triggered in week 18, 2023 most of the alerts were for AWD (20), measles(25), malaria(20) and bloody diarrhea (11)alerts
- Ministry of Health Republic of South Sudan declared cholera outbreak in Malakal with a total of 1455 cases reported with Two (2) death giving a CFR of 0.14% from February 22 to 14 May 2023 from both Malakal IDP camp and town
- Measles outbreaks continue with 6,046 reported; cases, 3,109 (15.3%) are epi-linked, 592(10.7%) labconfirmed, 1,712(70.9%) clinically compatible, and 633(5.6) discarded cases have been reported from epidemiological week 1, 2022, to week 18, 2023
- The persistent transmission of HEV in the Bentiu IDP camp continues with 4,136 cases since the beginning of 2019 and no new cases reported in week 18 of 2023.
- Hepatitis E Virus outbreak in Western Bahar el Ghazal State with 147 cases and 6 deaths CFR 4.1% since the start of the outbreak on 8 May 2023



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



IDSR timeliness performance at State level for week 18 & 17 of 2023



Timelinesss States Ranking	States	Number of reporting sites	No. of HFs Reported on Time in WK 18	Timeliness Percentage of WK 18	No. of HFs Reported on Time in WK 17	Timeliness Percentage of WK 17
1st	CES	128	121	95%	116	91%
2nd	WES	217	205	94%	215	99%
3rd	Lakes	113	106	94%	110	97%
4th	NBGZ	89	76	85%	73	82%
5th	Jonglei	129	101	78%	89	69%
6th	Warrap	127	93	73%	78	61%
7th	WBGZ	78	56	72%	27	35%
8th	EES	105	71	68%	58	55%
9th	Unity	97	61	63%	58	60%
10th	Upper Nile	113	62	55%	64	57%
	South Sudan	1196	952	80%	888	74%

KEY

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

The Timeliness of IDSR Reporting (Supported by EWARS Web and Mobile) at health facility level in week 18 stands at 80% while in week 17 it was 74% with 4 states above the National target of 80%.

Reporting Chanllenges in the poorly performed States are; insecurity, internet inaccessible; Turnover of Partners.



IDSR Completeness performance at State level for week 18 & 17 of 2023



Completeness States Ranking	States	Number of reporting sites	No. of HFs Reported regardless of time in WK 18	Completeness Percentage of WK 18	No. of HFs Reported regardless of time in WK 17	Completeness Percentage of WK 17	
1st	Lakes	113	113	100%	113	100%	
2nd	NBGZ	89	87	98%	87	98%	
3rd	CES	128	121	95%	121	95%	
4th	WES	217	205	94%	217	100%	
5th	EES	105	94	90%	70	67%	
6th	Upper Nile	113	98	87%	87	77%	
7th	WBGZ	78	67	86%	58	74%	
8th	Jonglei	129	104	81% 104		81%	
9th	Warrap	127	102	80%	124	98%	
10th	Unity	97	77	79%	88	91%	
	South Sudan	1196	1068	89%	1069	89%	

KEY

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

The Completeness of IDSR Reporting (Supported by EWARS Web and Mobile) at health facility level in week 18 stands at 89% as well as in week 17 with 9 states above the national target of 80%.

Reporting Challenges in the poorly performed States includes; insecurity; internet inaccessible; Turnover of Partners, Floods.



Surveillance: EWARS Timeliness performance indicator by partner for week 18 and 17 of 2023



Partner	HFs	Reporting		Performance	
PARTER	Number of reporting sites	# of reports received on Time in Week 18	Timeliness of Week 18	# of reports received on Time in Week 17	Timeliness of Week 17
IRC	1	1	100%	1	100%
World Relief	3	3	100%	3	100%
Medair	2	2	100%	2	100%
Islamic Relief	5	5	100%	5	100%
CIDO	1	1	100%	1	100%
SCI	2	2	100%	2	100%
UNIDOR	2	2	100%	2	100%
IMC	22	22	100%	18	82%
HFO	10	10	100%	6	60%
TRI-SS	2	2	100%	0	0%
ForAfrika	13	12	92%	13	100%
MSF-H	4	3	75%	4	100%
SMC	6	4	67%	6	100%
MSF-E	6	4	67%	4	67%
Medicair	5	3	60%	0	0%
IOM	10	4	40%	5	50%
SSHCO	1	0	0%	1	100%
AFAA	1	0	0%	0	0%
TOTAL	96	80	83%	73	76%

The Timeliness of EWARS in partners' supported sites stands at 83% in week 18 while in week 17 it was 76%

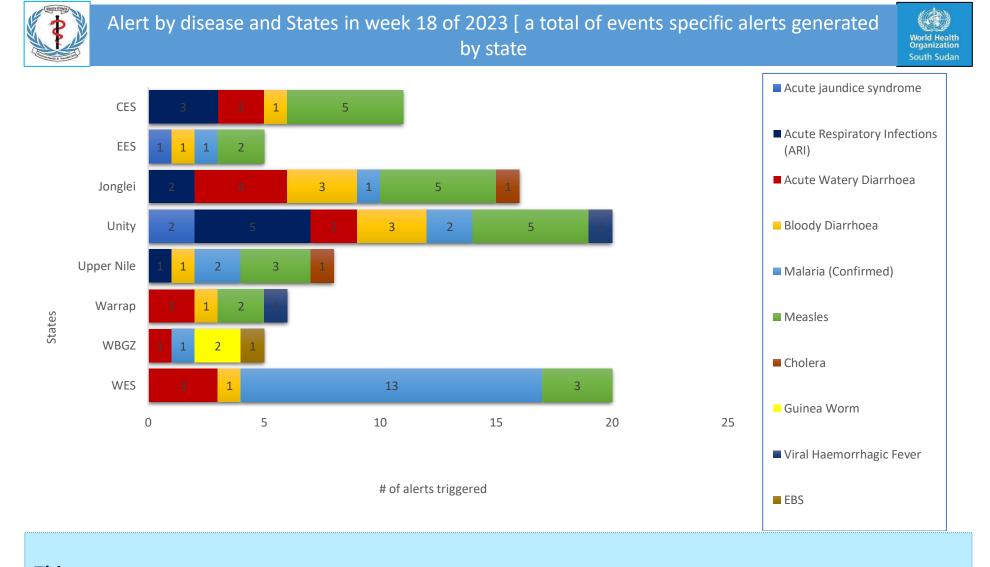


Surveillance: EWARS completeness performance indicator by partner for week 18 and 17 of 2023



Partner	HFs	Reporting	Performance								
PARTER	Number of reporting sites	# of reports received regardless of Time in Week 18	Completeness of Week 18	# of reports received regardless of Time in Week 17	Completeness of Week 17						
SSHCO	1	1	100%	1	100%						
IRC	1	1	100%	1	100%						
Islamic Relief	5	5	100%	5	100%						
CIDO	1	1	100%	1	100%						
SCI	2	2	100%	2	100%						
World Relief	3	3	100%	3	100%						
Medair	2	2	100%	2	100%						
ForAfrika	13	13	100%	13	100%						
HFO	10	10	100%	10	100%						
UNIDOR	2	2	100%	2	100%						
IMC	22	22	100%	21	95%						
MSF-E	6	6	100%	4	67%						
TRI-SS	2	2	100%	1	50%						
Medicair	5	4	80%	2	40%						
MSF-H	4	3	75%	4	100%						
SMC	6	4	67%	6	100%						
IOM	10	4	40%	5	50%						
AFAA	1	0	0%	0	0%						
TOTAL	96	85	89%	83	86%						

The Completeness of EWARS in partners' supported sites stands at 89% in week 18 while in week 17 it was at 86%



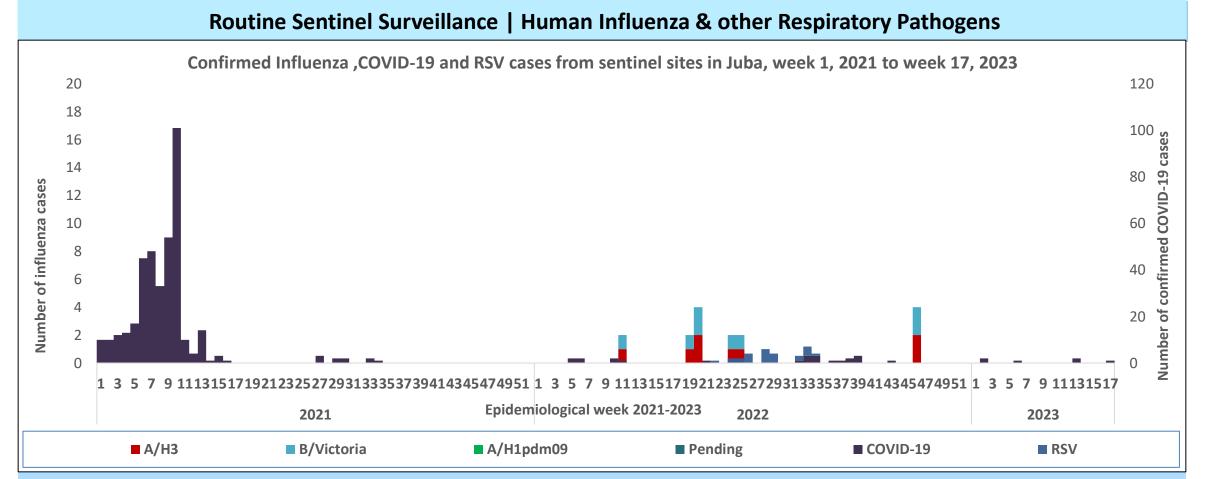
This week a total of 83 Alerts were triggered of which 53 are from outbreak prone diseases as Per the broken-down below

- 20 AWD alerts: these alerts were triggered from the following States, CES (2), Jonglei (4), Unity(2), Warrap (2), WBGZ (1), WES(3)
- 25 Measles alert: these alerts were triggered from the following States, CES(5), EES (2), Jonglei (5), Unity(5), Upper Nile(3), Warrap(2),, WES(3)
- ✤ 3 AJS alert: these were from Riwoto PHCC, MSF-H Leer PHCC and MSF-H Bentiu IDP Hospital
- I EBS alert: in IOM New Site Clinic of a suspected Guinea Worm from the community of Valega Nazareth
- ◆ 2 Cholera alert: from HFO Tanyang PHCU in old Fangak and Romala PHCU in Renk County
- ◆ 2 VHF alert: from Agok PHCC in Abyei and Rubkona Military Hospital which is under monitoring



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

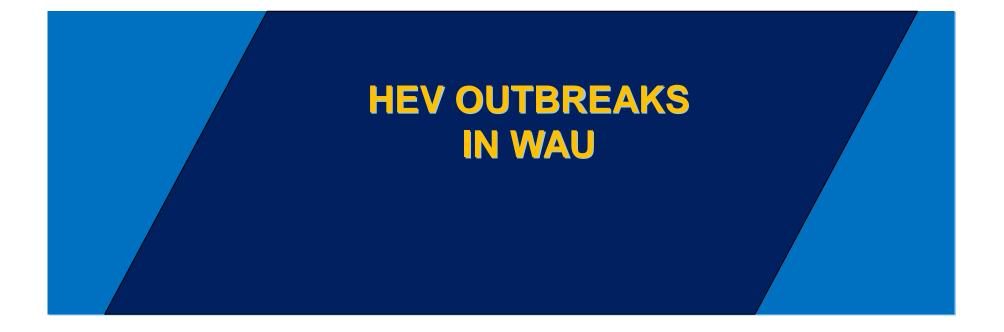




- There are currently Four designated Influenza sentinel surveillance sites in Juba (Juba Teaching Hospital and Al Sabah Children's Hospital Rumbek State Hospital & Juba Military Hospital) that are collecting epidemiological data and samples from ILI/SARI cases.
- By the end of week 52,2022; a total of 594 ILI/SARI samples were collected,529 samples tested negative, and Cumulatively, 21 tested positive for covid-19,8 positive for Influenza B (Victoria), and 6 were positive for influenza A(H3).26 RSV was confirmed in Week 52
- From weeks 1-17 2023, a total of 196 ILI/SARI were collected all 190 tested negative,6 positives for Covid-19, (0)Influenza types A (H3), B (Victoria), and 0 for RSV. In week17 of 2023 there is one positive for covid-19

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

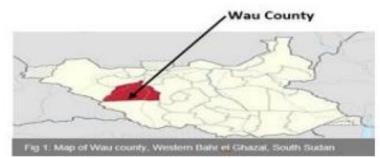








- On March 22, 2023, the state Ministry of Health Western Bahr el Ghazal state notified the Ministry of Health in Juba of clusters of cases and deaths in Wau.
- Cases presented with yellowing of eyes (Acute Jaundice Syndrome).
- State MOH and WHO conducted alert verification and collected samples for further investigations.
- On April 14, 2023, the national Ministry of Health declared an outbreak of Hepatitis E Virus (HEV) disease and subsequently activated the PHEOC to response mode and all response pillars
- Total of 147 HEV Cases including (6 death) CFR of 4.1% has been since the start of the outbreak
- Five(5) new case has been reported in week 18 of 2023
- Most cases (103, 89.6%) are from Nazareth Village, a cluster in Kosti village (3) and sporadic cases in three neighboring villages of Mutamadia (1), Taban (1), Massna (1) and Aturu in Jur river county (6).
- Most cases (88, 72.7%) are males. The median age is 20 (range:2-71) years.



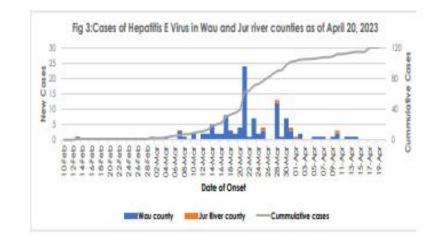


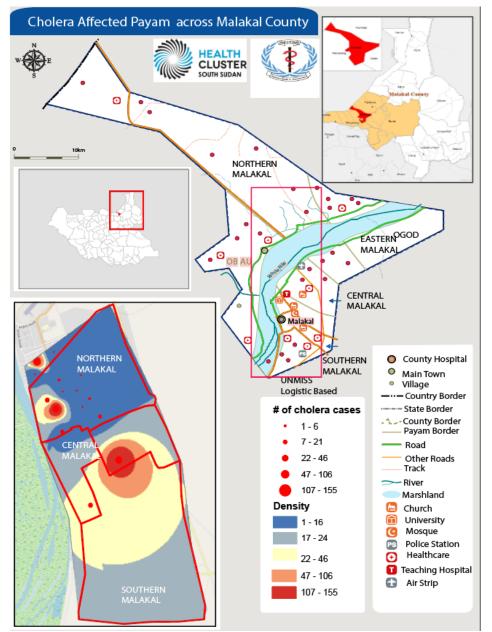
Table 1: Outcomes o	f onsite RDT Testi Wau, April 7-2		E Virus cases						
	Test type								
Number tested (n)	Hepatitis B (n=49)	Hepatitis C (n=48)	Hepatitis E (n=50)						
Number positive	3	0	36						
% positivity	6%	0%	72%						

CHOLERA OUTBREAK IN MALAKAL

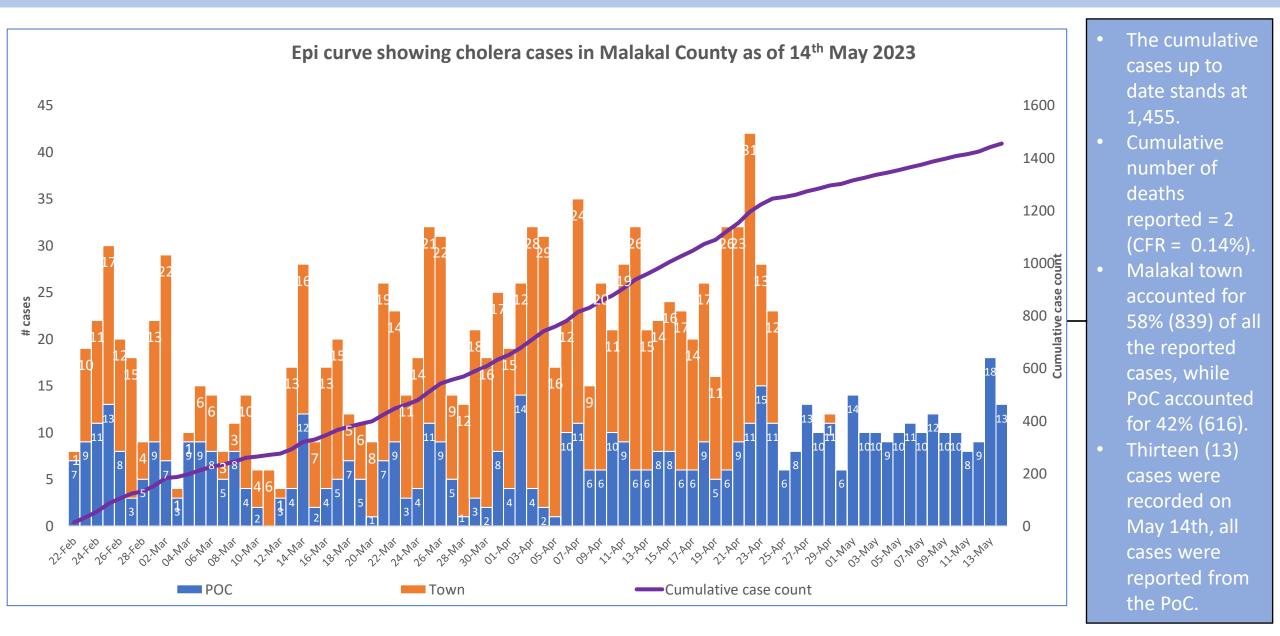
Key Epidemiological highlights from Malakal as of 14 May 2023



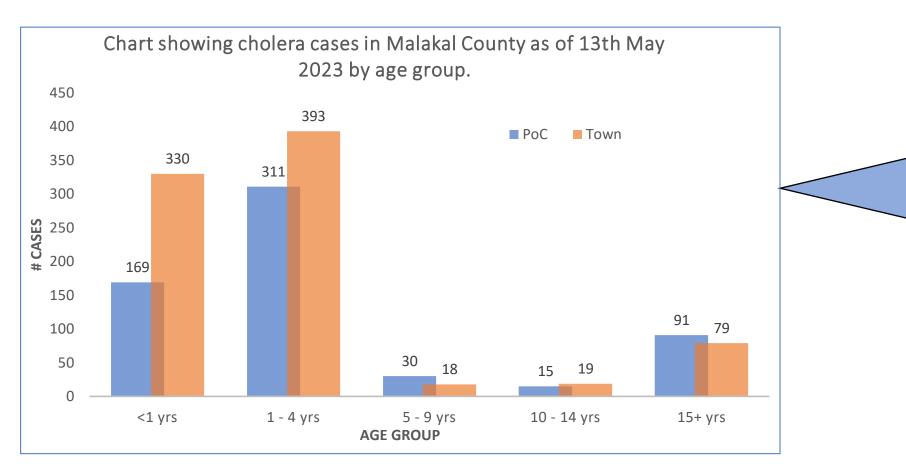
- On 1st March 2023, the National Ministry of Health received information of suspected cholera cases with two (2) RDT positive
- On 2nd March 2023, nine (9) samples were received at the NPHL, and two (2) samples tested positive for vibrio cholerae by Polymerase chain reaction (PCR) on 6th March 2023.
- On 7 March 2023, the National Ministry of Health declared a cholera outbreak in Malakal County, Upper Nile State
- Cumulatively, from 22 February to 14 May 2023 a total of 1,455
- cases with (2) death (CFR-0.14%)
- Thirteen (13) new cases and 0 deaths have been reported as of 14 May 2023 (POC = (13) and Town = (0)
- Overall,759 (52%) of the cases are males and 696(48%) are females.
- Children of age 1 4 years old are the most affected accounting for 704 (48%) of the total cases reported followed by 15 years and above 499 (34%).
- 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 for 5 days s of the campaign achieving 83% coverage



Epi curve showing cholera cases in Malakal County

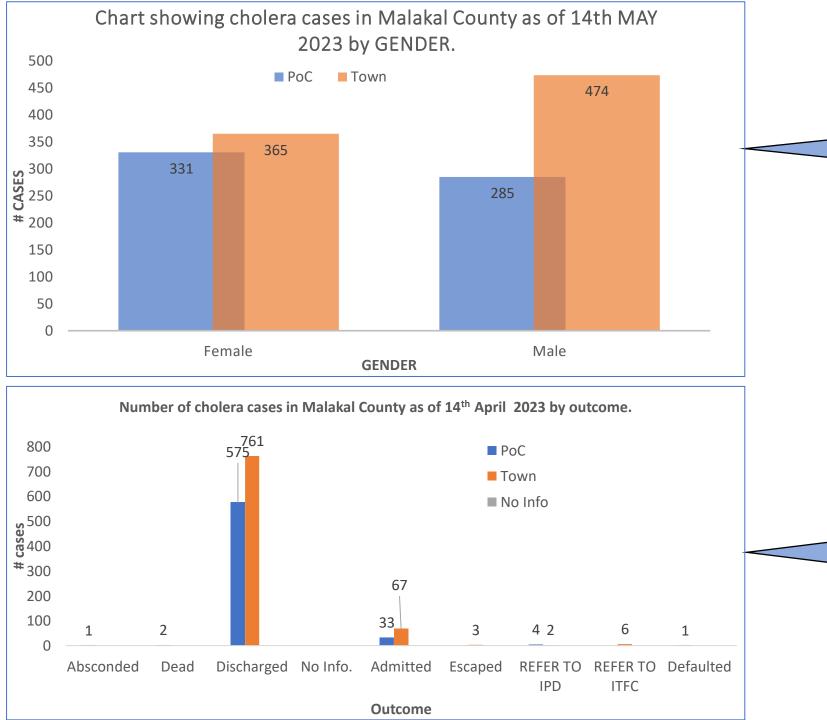


Cholera cases in Malakal County by age group.



- In terms of case distribution by age group, children of age 1 – 4 years old are the most affected which accounting for (48%, n=704), followed by those under 1 year old (34%, n=499).
- The highest number of cases among children aged 1-4 years was reported in Malakal town (393), with a total of 311 cases reported in the PoC.

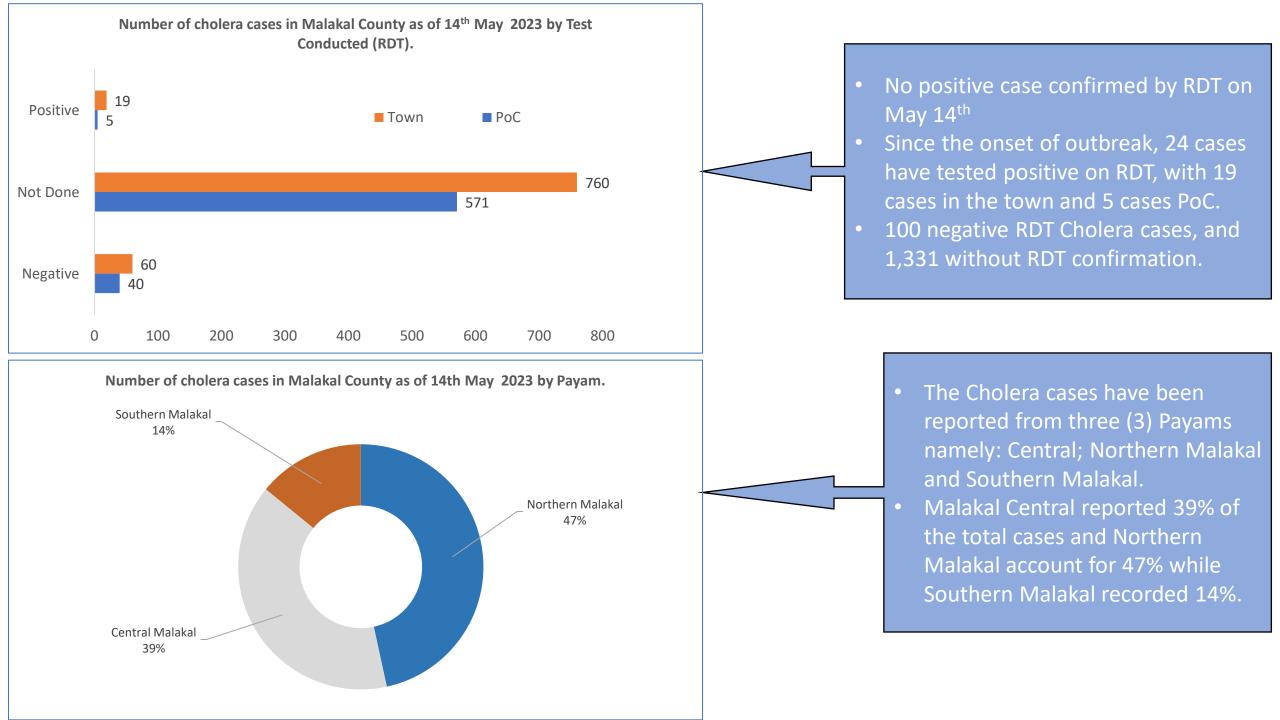
Age group	Cases	Percentage	Cum %
<1 yrs	499	34%	34%
1 - 4 yrs	704	48%	83%
5 - 9 yrs	48	3%	86%
10 - 14 yrs	34	2%	88%
15+ yrs	170	12%	100%
Grand Total	1455	100%	



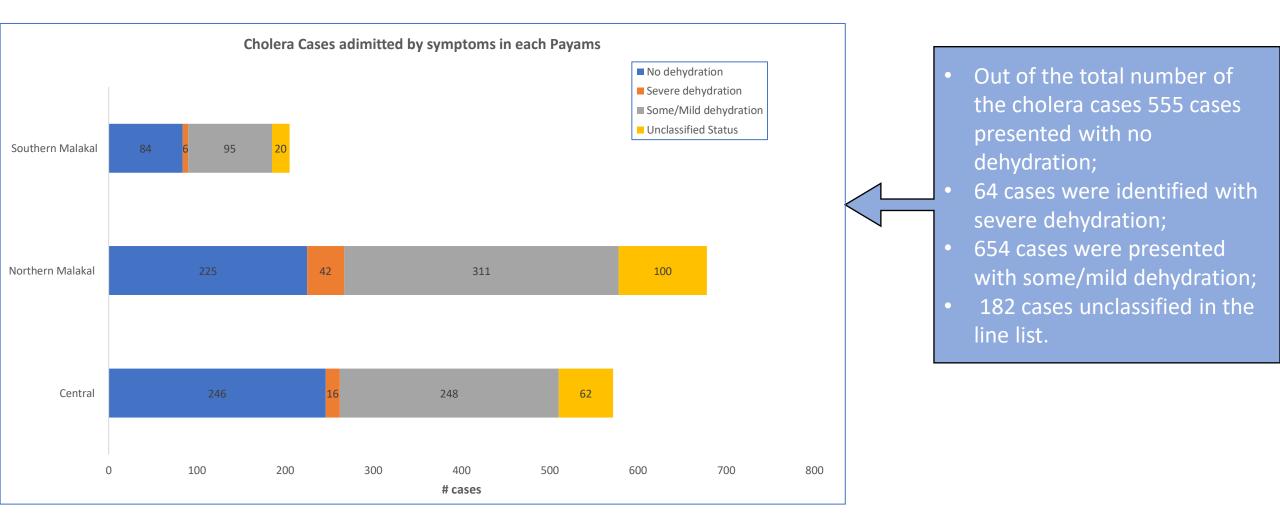
The gender distribution of the total cases indicates that male constitute of 52% (759) while women constitute of 48% (696). Malakal town has the highest number of reported cases among both genders.

Gender	Cases	Percentage	Cum %
Female	696	48%	48%
Male	759	52%	100%
Grand Total	1455	100%	

- Three (3) inpatient reported on 14th May 2023. Majority of the cases have been discharged from the cholera treatment centers both in town and PoC as depicted in the graph.
- The cumulative death stand at 2 since the onset of the out break;
- 6 cases referred to IPD, and 6 referred to ITFC.



Cholera Cases Admitted by Symptoms



Key interventions and Challenges in Malakal as of 30th March 2023

Key Interventions

- The National Ministry of Health declared a Cholera outbreak in Malakal county, Upper Nile State on 7th March 2023,
- The National EOC was immediately activated and MOH IMS instituted
- Ongoing coordination at both National and State levels to discuss the ational and State Cholera Taskforce continue to meet regularly to provide operational and strategic guidance to the ongoing cholera outbreak response.
- A multisectoral National and State RRT continue to provide epidemiological investigation and technical support to the response interventions in Malakal County.
- Launching of the Oral cholera vaccination targeting 66,121 individuals aged 1 year and above on 16 March 2023
- Over 54,538 people have been vaccinated both in the POC and Malakal town with a coverage of 83% in 5 days.
- WHO hired 2 additional vehicles to support response activities in Malakal.
- WHO has dispatched 1 x 48sqm and 1 x 24sqm medical tents to Malakal to support the ongoing Cholera response.
- WHO conducting a 5 days Case management training starting on 28 March and 1 April 2023 to support health partners (IMC, IOM, MSF and DRC)
- MSF completed the rehabilitation the Cholera treatment Center (CTC) in PoC and functional from Monday it will be official open
- 7 ORP supported IMC and 2 ORP supported by IOM with a total of 121 patient see, presented with AWD, no dehydration status, treated with ORS and discharged in 4 hours.
- Cumulation of 590 cholera case managed at the MSF facilities sites both for PoC with 215 (36%) and Town with 375 cases (64%).
- WHO/MOH continue to conduct active case searches in three (3) Health facilities (IOM PHCC,IMC PHCC & MSF Isolation in POC
- Cholera-specific training conducted focusing on Case Management, Lab, RCCE, IPC, WASH & Surveillance

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 RDT testing of suspected cholera cases at the subnational level, most especially, in health facilities and treatment centers.
- 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.
- The CTC in Malakal Teaching Hospital (MTH) has been closed and cases are been referred to POC
- Activation of the State RRT to responses with an active case search and investigation

Oral cholera vaccination was conducted only in 6 out of the 20 cholera hotspot counties

Significant population movements within Malakal IDP camps (Estimated Population is 34056) and back and forth movement between the IDPs in Juba and the displacement from the recent Tonga- Panyikang crisis.

There is also a challenge of access to safe and clean water and also the practice of open defecation

Continued flooding due to heavy rain experienced in the past 4 years & the next rainy season is likely to start in April





ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

MEASLES ` UPDATES



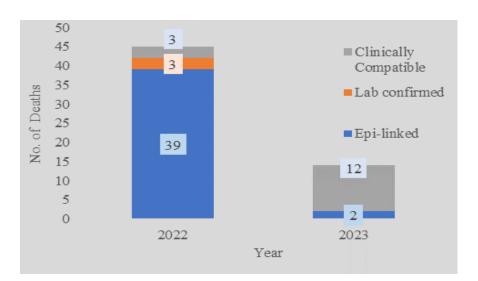




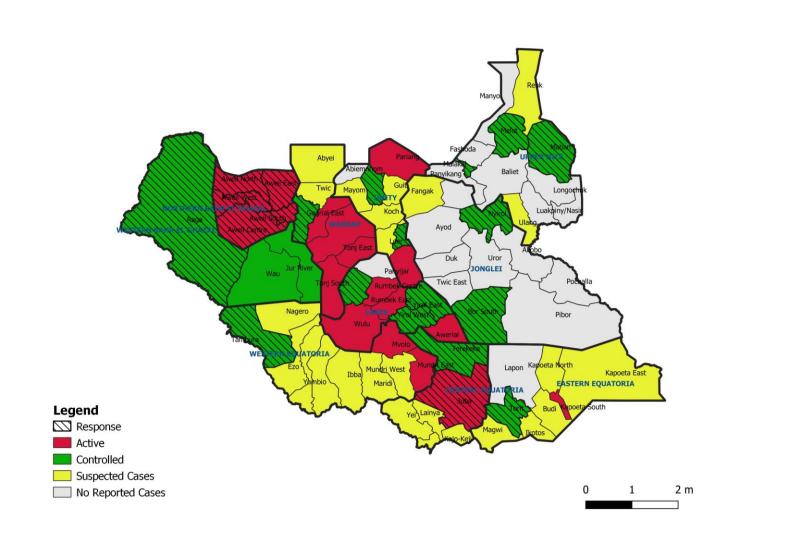
- A cumulative of 6,046 suspected cases have been reported; 4,137 and 1,909 in 2022 and 2023, respectively
- No new cases reported in week 18 of 2023
- No new reactive measles vaccination campaign conducted.
- The focus is now on the ongoing Nation-wide integrated measles vaccination campaign that has been launched on the 25th April 2023 at Al Sabah Hospital targeting 2.7 million children aged 6 to 59 months across South Sudan

FINAL CLASSIFICATION	202	22	202	:3	TOTAL
	NO. OF CASES	%	NO. OF CASES	%	
Lab confirmed	392	9.5	200	10.7	592
Epi-linke d	2,825	68.3	284	15.3	3,109
Clinically Compatible	391	9.5	1,321	70.9	1,712
Total	3,608	87.2	1,805	96.9	5,413
Discarded (-ve)	529	12.8	104	5.6	633
Grand Total	4,137	100.0	1,909	100.0	6,046

Table: Yearly distribution of cases by final classification

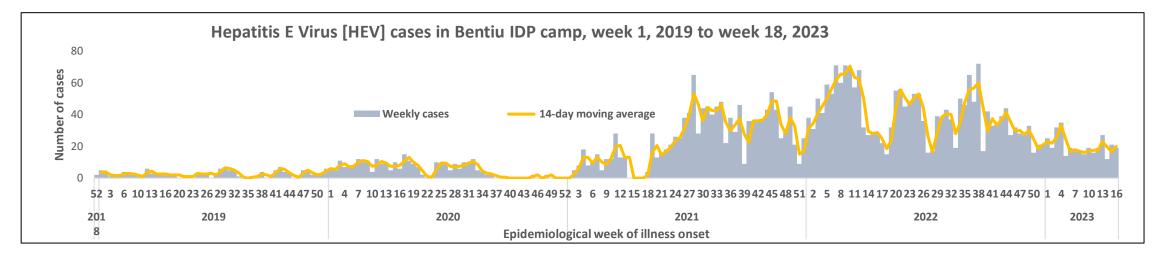


Deaths by year and final classification



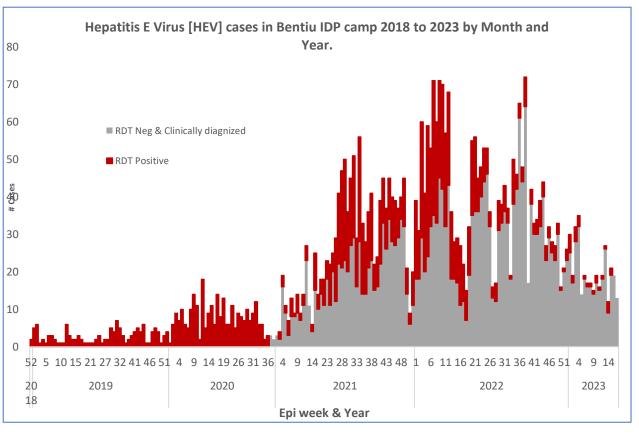
ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

HEPATITIS E VIRUS ` UPDATES



Descriptive Epi

- Cases of Acute Jaundice Syndrome (AJS) in the Bentiu IDP camp continue with an overall total of 4,136 cases since the beginning of 2019 to week 18 2023 with overall 27 deaths. CFR of 0.65%
- Of all the cases, reported, 1481 tested positive for Hepatitis E virus by Rapid Diagnostic Test.
- In 2023, of the 326 AJS cases reported, only 28 tested positive for Hepatitis E Virus by RDT.
- No new AJS cases reported in week 18 and no RDT positive reported in week 18 2023
- Of all the AJS cases reported in, 2023 only 105 were managed as inpatient cases and the rest were treated as outpatients
- 46% are female and 54% are male of all the AJS. 40% of all the cases are in the age-group 15-44 years followed by 24% in children ages 1-4 years



HEV response update

- 1. Biweekly coordination forum comprising health, WASH, and other clusters
- 2. Surveillance enhanced through the provision of refresher training, distribution of case definition, and other reporting tools
- 3. Weekly analytics of the outbreak data to monitor trends and inform decision making
- 4. Case management for symptomatic cases provided by the PHCCs; severe cases are referred to MSP PoC Hospital
- 5. The HEV vaccination campaign was conducted in Bentiu IDP Camp; the first round with a coverage of 91% and the second round with a coverage of 82% among those aged 16-40 years (incl. pregnant women.
- 6. Risk communication and awareness are enhanced through household health promoters/hygiene promoters; radio talk shows and messaging. Cholera and HEV messages were disseminated.
- 7. Enhanced access to safe drinking water, sanitation facilities such as latrines, mass clean-up campaigns, regular water quality testing, and monitoring **HEV response challenges**
- 1. Lack of long-term investment to improve the WASH situation in the camp
- 2. Lack of meaningful behavioral changes among the population
- 3. Frequent population movements between the IDP and host communities; the host community was not vaccinated
- 4. Floods have worsened the WASH situation in the camp





COVID-19 Virus Situation Summary

Europe

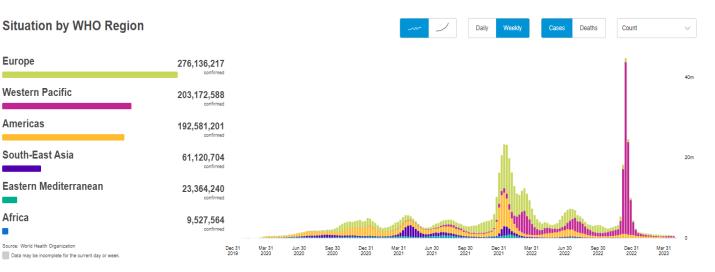
Americas

Africa



Situation update as of 10, May 2023

- Globally, 10 May 2023, there have been **765,903,278** confirmed cases of COVID-19, including 6,927,378 deaths, reported to WHO. As of 9 May 2023, a total of **13,350,487,934** vaccine doses have been administered.
- In Africa, as of 10 May 2023 there have been 9,527,564 confirmed cases of COVID-19, including 175,354 deaths reported to the WHO
- In South Sudan, from 3 January 2020 to 10 May 2023, there have been 18,368 confirmed cases of COVID-19 with 138 deaths, reported to WHO. As of 7 May 2023, a total of **4,312,900** vaccine doses have been administered.
- Second round of the COVAX campaign has been launched and the campaign is ongoing in most counties to cover the remaining 72 counties



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



OVERALL CONCLUSIONS AND RECOMMENDATIONS





- In week 17, 2023, the IDSR reporting timeliness and completeness were 80% and 89% respectively and timeliness and completeness for EWARN sites were at 83% and 89% respectively
- A total of 83 alerts were triggered in week 18, 2023 most of the alerts were for AWD (20), measles(25), malaria(20) and bloody diarrhea (11)alerts
- Ministry of Health Republic of South Sudan declared cholera outbreak in Malakal with a total of 1455 cases reported with Two (2) death giving a CFR of 0.14% from February 22 to 14 May 2023 from both Malakal IDP camp and town
- Measles outbreaks continue with 6,046 reported; cases, 3,109 (15.3%) are epi-linked, 592(10.7%) labconfirmed, 1,712(70.9%) clinically compatible, and 633(5.6) discarded cases have been reported from epidemiological week 1, 2022, to week 18, 2023
- The persistent transmission of HEV in the Bentiu IDP camp continues with 4,136 cases since the beginning of 2019 and no new cases reported in week 18 of 2023.
- Hepatitis E Virus outbreak in Western Bahar el Ghazal State with 147 cases and 6 deaths CFR 4.1% since the start of the outbreak on 22 March 2023
- Nation wide integrated measles vaccination campaign has been launched on the 25th April 2023 at Al Sabah Hospital targeting 2.7 million children aged 6 to 59 months across South Sudan

Recommendations



- Partners to continue supporting County Health Departments (CHD) & State Ministries of Health on timely IDSR/EWARN reporting and involve the boma health workers to support community-based surveillance
- Health facilities to conduct an initial investigation on suspected cases of epidemic-prone diseases and collect samples
- Conduct reactive measles vaccination campaign in counties with confirmed outbreaks and advocate for enhanced routine immunization through PIRI
- Continue with preparedness activities to strengthen surveillance at all levels including conducting afteraction reviews and simulation exercises.
- Continue to support the multicluster HEV response strategy in the Bentiu IDP camp and advocate for depopulation of





IDSR timeliness & completeness performance at county level for week 18 and 17 of 2023 (1)



		Number of reporting	No. of HFs Reported on Time in	s Percenta	regardles s of time	Complete ness Percentag e of WK	ss of	Completen ess Percentage	STATE	COUNTY	Number of reporting sites	No. of HFs Reporte d on Time in WK 18	Timelines s Percenta ge of WK 18		Completene ss Percentage of WK 18	No. of HFs Reported regardless of time in WK 17	Completene ss Percentage of WK 17
STATE	COUNTY	sites	WK 18	18	III VVK 18	18	WK 17	Wk 17	Unity	Abiemnho m	4	4	100%	4	100%	4	100%
CES	Juba	48	48	100%	48	100%	48	100%	Unity	Pariang	12	12	100%	12	100%	12	100%
Lakes	Cueibet	15	15	100%	15	100%	15	100%	,	5							
Lakes	Rumbek North	7	7	100%	7	100%	7	100%	Unity	Guit	6	6	100%	6	100%	6	100%
Lakes	Rumbek East	24	24	100%	24	100%	24	100%	WES	Nzara	21	21	100%	21	100%	21	100%
Lakes	Awerial	7	7	100%	7	100%	6	86%	WES	Nagero	10	10	100%	10	100%	10	100%
Lakes	Rumbek Centre	23	23	100%	23	100%	23	100%	WES	Maridi	25	25	100%	25	100%	25	100%
Lakes	Yirol West	12	12	100%	12	100%	12	100%	14/50	Mundri		40	40000		100%	47	0.4%
Lakes	Yirol East	11	11	100%	11	100%	11	100%	WES	East	18	18	100%	18	100%	17	94%
NBGZ	Aweil South	13	13	100%	13	100%	12	92%	WES	Yambio	42	42	100%	42	100%	42	100%
NBGZ	Aweil Centre	13	13	100%	13	100%	12	92%	WES	Ezo	32	32	100%	32	100%	32	100%
CES	Lainya	11	11	100%	11	100%	11	100%	WES	Mvolo	11	11	100%	11	100%	11	100%
CES	Terekeka	13	13	100%	13	100%	13	100%	WES	Tambura	26	26	100%	26	100%	26	100%
NBGZ	Aweil East	23	21	91%	23	100%	22	96%									
CES	Yei	18	16	89%	18	100%	18	100%	Unity	Leer	15	14	93%	14	93%	15	100%
WBGZ	Wau	27	24	89%	24	89%	23	85%	Unity	Rubkona	11	10	91%	11	100%	11	100%
CES	Kajo Keji	28	24	86%	22	79%	21	75%	WES	Mundri	21	19	90%	19	90%	21	100%
WBGZ	Jur River	40	32	80%	34	85%	30	75%		West							
CES	Morobo	10	8	80%	8	80%	9	90%	Unity	Mayom	13	11	85%	12	92%	13	100%
NBGZ	Aweil North	20	15	75%	20	100%	20	100%	Unity	Mayendit	11	4	36%	11	100%	11	100%
NBGZ	Aweil West	20	14	70%	18	90%	17	85%	WES	lbba	11	1	9%	1	9%	11	100%
Lakes	Wulu	14	7	50%	14	100%	14	100%	Unity	Koch	7	0	0%	3	43%	6	86%
WBGZ	Raja	11	0	0%	9	82%	7	64%	Unity	Panyijiar	18	0	0%	4	22%	1	6%

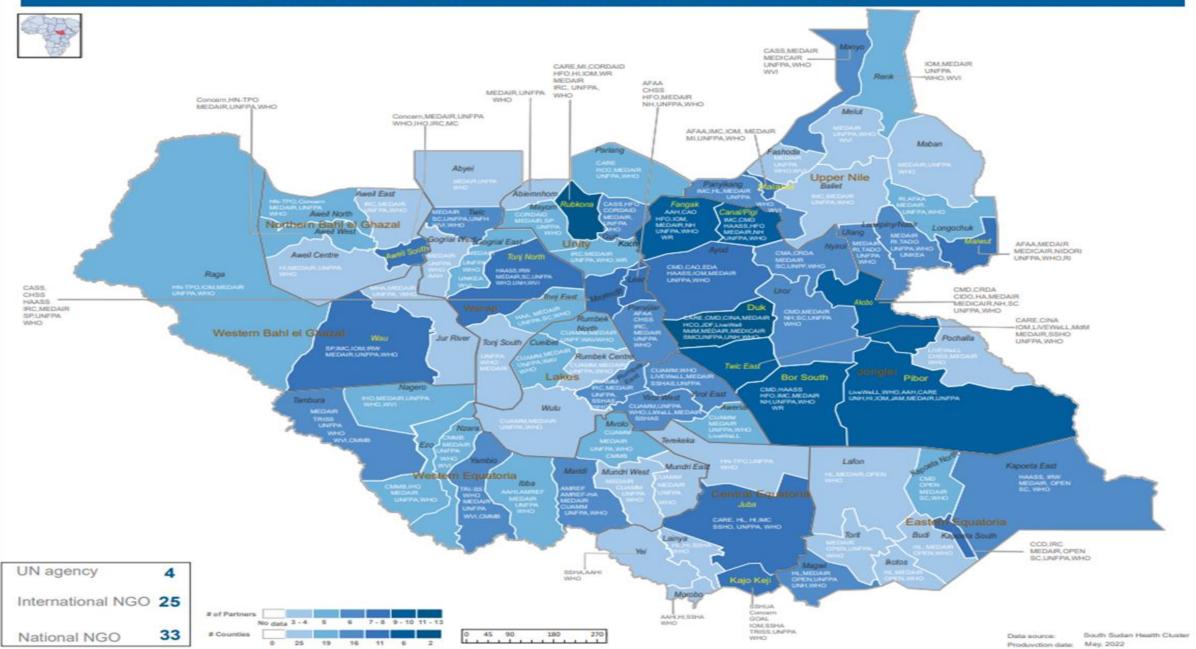


IDSR timeliness & completeness performance at county level for week 18 and 17 of 2023 (2)



		Number of reporting sites	No. of HFs Reporte d on Time in	Timelin	regardle	Complet eness Percent age of	regardl ess of	Complete ness Percenta ge of WK	STATE	COUNTY	Number of reporting sites	No. of HFs Report ed on Time in WK 18	Timeline ss Percenta ge of WK 18	regardle ss of	Completen ess Percentage of WK 18	regardless	Completen ess Percentage of WK 17
STATE	COUNTY Pibor	8	WK 18 8	WK 18	WK 18 8	WK 18	Wk 17 8	17 100%	Upper Nile	Renk	6	6	100%	6	100%	0	0%
Jonglei		_							Warrap	Tonj East	12	12	100%	12	100%	12	100%
Jonglei	Bor	19	19	100%	19	100%	19	100%	Warrap	Tonj North	15	15	100%	15	100%	15	100%
Jonglei	Pochall a	7	7	100%	7	100%	7	100%	Warrap	Tonj South	12	12	100%	12	100%	12	100%
Jonglei	Twic	9	9	100%	9	100%	0	0%	Upper Nile	Baliet	5	5	100%	5	100%	3	60%
EES	East Torit	11	11	100%	11	100%	9	82%	Upper Nile	Panyikan g	2	2	100%	2	100%	2	100%
EES	Kapoet a East	7	6	86%	6	86%	7	100%	Upper Nile	Akoka	5	5	100%	5	100%	5	100%
Jonglei	Ayod	13	11	85%	12	92%	12	92%	Upper Nile	Ulang	9	8	89%	8	89%	8	89%
Jonglei	Duk	13	11	85%	11	85%	13	100%	Upper Nile	Fashoda Gogrial	9	8	89%	8	89%	8	89%
EES	Magwi	17	14	82%	17	100%	16	94%	Warrap	East	15	12	80%	13	87%	14	93%
Jonglei	Fangak	21	17	81%	17	81%	15	71%					700/		700/	42	0.6%
EES	Kapoet a North	10	8	80%	8	80%	10	100%	Warrap Upper Nile	Abyei Maban	14	11 13	79% 68%	11 18	79% 95%	12	86% 95%
Jonglei	Canal	14	9	64%	9	64%	10	71%	Warrap	Gogrial West	31	19	61%	27	87%	24	77%
	Pigi								Upper Nile	Makal	9	5	56%	7	78%	5	56%
Jonglei	Akobo	15	9	60%	11	73%	10	67%	Upper Nile	Luakpiny	10	5	50%	8	80%	9	90%
EES	Budi	17	10	59%	13	76%	9	53%	opper Mile	Nasir	10		50%	0	0070	3	3070
EES	Ikotos	19	11	58%	15	79%	15	79%	Warrap	Twic	28	12	43%	12	43%	20	71%
EES	Kapoet a South	9	5	56%	9	100%	4	44%	Upper Nile	Longechu	9	1	11%	8	89%	9	100%
Jonglei	Nyirol	2	1	50%	1	50%	1	50%	Upper Nile	к Manyo	15	0	0%	12	80%	5	33%
EES	Lopa Lafon	15	6	40%	15	100%	9	60%	Upper Nile	Maiwut	9	0	0%	5	56%	5	56%
Jonglei	Uror	8	0	0%	0	0%	1	13%	Upper Nile	Melut	6	0	0%	0	0%	0	0%





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 2022 use the link below:

https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillancebulletin-2023

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

For more help and support, please contact:

Dr Joseph Lasu Hickson Director, Emergency Preparedness and Response Ministry of Health **Republic of South Sudan** Telephone: +211921395440 Email: josh2013.lasu@gmail.com

Dr. John Rumunu **Director General Preventive Health Services** Ministry of Health **Republic of South Sudan** Telephone: +211924767490 Email: ori.moiga@gmail.com

IDSR Bulletin Editorial Team

1.Mr. Ajak Ater, MoH - Email: ajakater014@gmail.com 2.Mrs. Sheila Baya, WHO- Email: bayas@who.int 3.Mr. Robert Lasu Martin, WHO -Email: lasur@who.int 4.Mrs. Rose Dagama, WHO - Email: dagamaa@who.int 5.Dr. Abraham Adut, WHO- Email: abenegoa@who.int 6.Dr. Tony Wurda, WHO-Email wurdatt@who.int 7.Mr. Korsuk Scopas.WHO-Email lonyikk@who.int 8.Dr Antonio Oke, WHO -Email okea@who.int 9.Dr Aggrey Bategereza, WHO -Email bategerezaa@who.int

Notes

WHO and the Ministry of Health gratefully acknowledge the surveillance officers [at state, county, and health facility levels], health cluster and health pooled fund (HPF) partners who have reported the data used in this bulletin. We would also like to thank ECHO, USAID and World Bank for providing financial support.

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









Humanitarian Aid









Humanitarian Aid and Civil Protection