

Key Figures					
Number of new suspected cases reported ¹ in the last 24 hours	02	Cumulative number of labs confirmed cases	01	Cumulative number of suspected deaths	05
Number of new deaths reported in the last 24 hours	00	Cumulative number of suspected cases	24	Cumulative number of cases	25

Highlights

- The National Ministry of Health of the Republic of South Sudan declared a Yellow Fever outbreak on 24 December 2023.
- Two (02) Yellow Fever suspected cases were reported on 18 January 2024 from Yambio County.
- A cumulative of twenty (25) Yellow Fever cases (24 suspected and 01 confirmed) were reported from four Counties in Western Equatoria state: Yambio County (13), Nzara County (05), and Tambura County (06) and Ezo (01) as of 18 January 2024.
- As of 18 January 2024, a total of 05 Yellow Fever suspected deaths were reported.²
- One (01) case was confirmed positive for Yellow Fever at the National Public Health Laboratory (NPHL) on 24 December 2023.
- A rapid response team was deployed to investigate the suspected outbreak.
- The Public Health Emergency Operations Centre (PHEOC) has been activated at the national level.
- Vaccine request submitted to International Coordinating Group (ICG) and 410,596 doses have been approved for Yambio, Nzara, Tambura, Ezo and Ibba Counties.
- Incident action plan (IAP), Interim case management guide, Interim travel guide and revised terms of reference for field outbreak investigation were endorsed. With exception of the IAP and travel guide, all other documents have been approved.
- State level response plan being developed to be aligned with national level response plan.
- Preparedness and response activities (coordination, surveillance, laboratory, case management, risk communication and community engagement, vaccination, infection prevention and control etc) are being reinforced by State Ministry of Health and supported by partners (WHO, UNICEF, CARE, Johanitter, AFOD and CORDAID) in state and counties bordering Yambio, Nzara, Ezo and Tambura.

Background

- On 21 December 2023, the Ministry of Health was notified a suspected case of viral hemorrhagic fever from Yambio County, Western Equatoria State. The suspected case was a 24-year³-old male from Kangura village in Gangura Payam, Yambio County who presented with generalized body weakness, headache, epigastric discomfort, Fever, vomiting of blood and yellowish discoloration (Jaundice) of eyes.

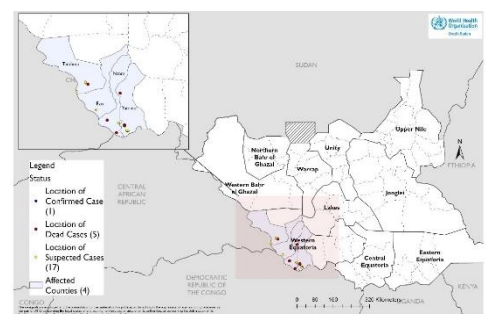


Figure 1: Location of Yellow fever outbreak in South Sudan

¹ Number of cases detected in the last 24 hours. This includes both at the health facility and community

² A death reported from Yambio with an onset of fever on September 15, 2023, was excluded as it did not meet the revised outbreak case definition.

³ Further verification by national rapid response team revealed the age of the index case to be 24 years rather than 18 years.



- The patient was isolated at the health facility, and a sample was taken for further investigation. The sample tested positive for Yellow Fever on 24 December 2023 at the National Public Health laboratory.
- Additional suspected cases of Yellow Fever have been reported in two other counties (Nzara and Tambura) in Western Equatoria state.

Current update as of 18 January 2024

Coordination

- Hon. Yolanda Awel Deng Juach, Minister, Ministry of Health, Republic of South Sudan, declared an outbreak of Yellow Fever in Yambio, Western Equatoria State on the 24th December 2024 and gave a press statement to the media house.
- The PHEOC has been activated with all pillars to facilitate coordinated response to the outbreak.
- Daily coordination meeting with stakeholders and key partners is being conducted at the PHEOC.
- Similar coordination structures have been activated at the state and county levels.
- Pillar leads and co-leads have been identified and requested to update the National Steering Committee daily.
- Incident action plan, Interim case management guide, Interim travel guide and revised terms of reference for field outbreak investigation were endorsed. With exception of the IAP and travel guide, all other documents have been approved.
- Members of national Rapid Response Team to be deployed in Nzara and Tambura to establish coordination mechanism.

Surveillance, Laboratory, and Reporting

- Two (02) Yellow Fever suspected cases were reported on 18 January 2024 from Yambio County.
- Cumulatively twenty-five (25) Yellow Fever cases (24 Suspected and 01 Confirmed) including five deaths (05) were reported as of 18 January 2024 giving a Case Fatality rate 20%.
- All cases were reported from four counties of Western Equatoria state: Yambio County (13), Nzara County (05), and Tambura County (06) and Ezo (01)
- From the reported cases (25), 56% (14) were males, and females accounted for 44%.
- Majority (88%) of the reported cases are 15 years and above whilst 12% are reported to be among 1 to 4 years old
- Thirteen (13) samples tested negative for Yellow Fever at the NPHL.
- A rapid response team is on the ground conducting an outbreak investigation, active case search, community-based surveillance.

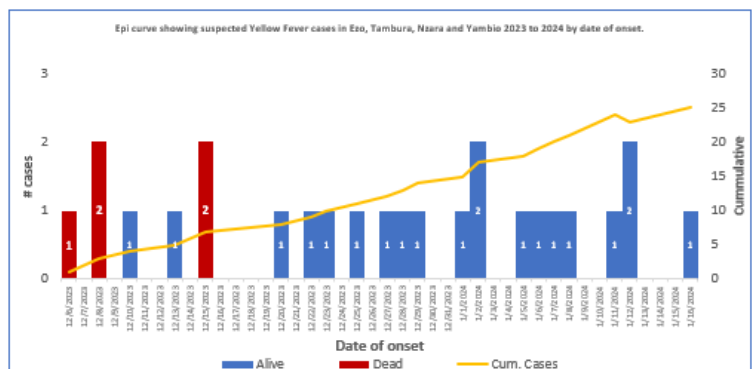


Figure 2: Epi curve showing suspected Yellow Fever cases 2 by date of onset

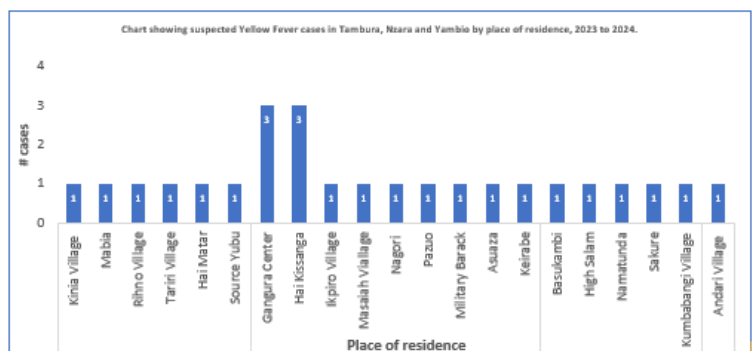


Figure 3: Count of reported cases by location



Case management

- All health facilities have been alerted to screen and triage for suspected cases using the outbreak case definition.
- An Interim Case management guide has been developed to support health care workers in management of patients.
- MSF-Spain is willing to support case management in PHCCs of Gangura and Sakure payams.

Risk communication and community engagement (RCCE)

- Partners have started community engagement through their home health promoters and community key informants.
- Enhancing RCCE activities during church services and market days to sensitize community members on reporting suspected cases is ongoing.
- Stakeholders' mapping has been completed, and key messages on Yellow Fever prevention, control and reporting have been prepared.
- 75,000 flyers and 2,500 posters printed and dispatched from Juba.
- Radio talk shows ongoing.
- Radio spot broadcasting on Yellow Fever prevention and control in progress. Request has been submitted to Eye Radio.

Vaccination

- The Yellow fever vaccine request, including operational costs, has been submitted to the International Coordinating Group. Presently, the request has been approved, securing 410,596 doses. The approved target is 372,511 individuals across 5 counties in WES (Yambio, Ezo, Nzara, Tambura, and Ibba).
- Anticipated arrival date for the yellow fever vaccines in-country on January 23, 2024.
- The budget for the operational component has been costed and is currently under discussion by the Ministry of Health (MOH), partners, and the ICG for approval.
- State teams have developed the initial draft of the micro plans. These plans are currently under thorough review by the Expanded Program on Immunization (EPI) Technical Working Group (TWG) for approval and implementation.
- The state team has developed a detailed chronogram of activities. This schedule is under review by the EPI TWG, led by the Ministry of Health, ensuring meticulous planning and execution of the reactive YF vaccination.
- The EPI TWG is developing guidelines for Point of Entry (POE) vaccination, aligning with the overall strategy for effective yellow fever prevention.
- Partners have been identified to support vaccination campaign in their respective counties of operation.

Logistics and supplies

- Medical supplies and IPC equipment including VHF 500 PPE Kit of 1 metric ton to support the affected counties arrived Yambio.
- The team of entomologists have returned to Juba.



Implementing Partners by Pillar

Pillar	Partner supporting
Coordination	MOH, WHO
Surveillance	MOH, WHO and CGPP-WVI
Case Management	MOH, WHO, MSF
Water, Sanitation, and Hygiene (WASH)	MOH, IOM, ICRC, CGPP-WVI, UNICEF, WHO
Infection Prevention and Control (IPC)	MOH, WHO
Risk Communication and Community Engagement (RCCE)	MOH, WHO, CGPP-WVI and UNICEF
Vaccination	MOH, WHO, UNICEF
Vector Control	MOH, MSF, Malaria Consortium
Logistics	MOH, WHO, UNICEF

Pillar leads and co-leads

Pillar	Lead (MOH)	Co-lead
Coordination	Dr John Rumunu/Atem Mayen	Dr Aggrey/ Kwuakuan (WHO)
Surveillance	Dr Lasu Joseph/Agnes Jokudu	Sheila Baya (WHO)
Laboratory	James Ayei	Andrew Baguma (WHO)
Case Management	Dr Harriet Pasquale /Dr Yohana	Richard Lobuya (WHO)
IPC/WASH	Nyankiir Ajing	Abraham (WHO)
RCCE	Mary Obat	Aping (UNICEF)
Vaccination	George Legge	Dr Anthony (WHO)
Vector Control	Constantino Doggale	Malaria Consortium/Mentor Initiative)
Logistics and Supplies	Hillary Hakim	WHO

Challenges

- Limited partners on the ground to support the response.
- Community perceptions regarding patients with jaundice, particularly their preference for traditional healers.
- Limited capacity to manage severe cases at the available health facilities and difficulty in follow-up of suspected cases at home.
- Weak surveillance in some counties in Western Equatoria State.
- Limited capacity at health facilities for sample collection, packaging, and transportation.
- No Refresher training to RRTs, Social mobilizers.

Next steps

- Strengthen coordination at the national, state, and county levels.
- Continue monitoring and analysis of surveillance data, active case search, investigation of alerts.
- Conducting Entomological surveillance in the affected areas
- Capacity building for health workers on sample collection, packaging, transportation, case management, and case detection and reporting.
- Finalize the Yellow Fever outbreak response plan.



PUBLIC HEALTH EMERGENCY OPERATIONS CENTRE (PHEOC)

Daily Situation update on the Yellow Fever outbreak in Western Equatoria State, South Sudan

Date: 19 January 2024

Situation Report Number 024



- Disseminate information, education, and communication materials on Yellow Fever transmission and control.
- Engage more partners and other stakeholders for resource mobilization.
- Need engagement of the private facilities
 - Distribution of the CIF and case definition for yellow fever
 - Training on the CIF
- Engagement of traditional healers
- SOPs for all pillars to standardize the process of removing duplicates and replacing them with new cases
- Refresher training to RRTs, Social mobilizers, and BHI.

For more information, please contact

Dr. John Rumunu Incident Manager E: ori.moiga@gmail.com P: +211 924 767 490	Dr. Joseph Lasu Emergency Preparedness & Response Director E: josh2013.lasu@gmail.com P: +211 921 395 440	South Sudan PHEOC E: sspheoc@gmail.com P: +211 925 851 662 P: +211 917 235 355	National Public Health Laboratory Gregory Wani E: wanigregory@gmail.com P: +211912806376/0927040622	Dr BATEGEREZA, Aggrey Kaijuka WHO-EPR Team Lead E: bategerezaa@who.int P: +211 924222030
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Editorial team

MOH: Dr John Rumunu, Dr Joseph Lasu and Mabior Kiir
WHO: Dr Bategereza Aggrey, Dr Rurangwa, Eric, Dr Mukesh Prajapati, Dr Abraham Adut, Dr Mustafa Lasu, Dr Wurda Tony, Dr Kwuakuan Yealue, Dr Maleghemi Sylvester, Ms Sheila Baya, and Malick Gai
ICAP: Dr. Kennedy Muni
Africa CDC: Dr Zerihun Kassa, Hamad Nnimbo