Republic of South Sudan
Weekly Integrated Disease Surveillance and Response (IDSR) Epidemiological Bulletin

Reporting period: Epidemiological Week 16
15 - 21 April 2024

Background
This weekly bulletin presents the epidemiological status of priority diseases, conditions under surveillance, and public health events in South Sudan. The data presented in the bulletin come from various actors involved in preparedness and response to public health events in the country.

Highlights for the current reporting period

- In week 16 of 2024, the IDSR reporting timeliness and completeness were 81% and 93%, respectively, and IDSR performance at the EWARN mobile sites was 93%.
- Completeness of IDSR reporting at private Health facilities in Juba and Wau was only at 95%
- A total of 276 alerts have been triggered in the EWARS system, with 62% (171/276) verified in the system. Most of the alerts were for Measles (18%), ABD (17%), AWD (16%), Guinea Worm (14%)
- During Epi-weeks 1 to 15 in 2024, a total of 416 ILI/SARI samples have been collected; 390 tested negatives for all pathogens,
- During this week 5 more samples tested positive for meningitis
- As of Epi week 16, 2024, 2,271 suspected measles cases were reported, with 146 (6.4%) lab-confirmed, 39 suspected Measles deaths
- A total of 624 AJS cases, including 22 deaths, have been reported from week 1 of 2023 to week 15 of 2024. Most cases were reported among the age group 15 years and above
Surveillance System Performance

The epidemic alert and response system in South Sudan currently relies mainly on immediate alert notification and weekly case data reporting through the Integrated Disease Surveillance and Response (IDSR) system. This system is complemented by a weekly Early Warning Alert and Response System (EWARS).

Completeness (proportion of all reports received regardless of time) and timeliness (proportion of reports received by the Wednesday following the end of the reporting period) of IDSR and EWARS are shown in Table 1 below. Timeliness and completeness for week 16 were at 81% and 93%, respectively.

### Table 1: Timeliness and completeness of IDSR reporting by State for week 16, 2024

<table>
<thead>
<tr>
<th>State</th>
<th>Total facilities</th>
<th>Number of facilities reported (Completeness)†</th>
<th>Current reporting period</th>
<th>Cumulative since year start (2024 level)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Timeliness wk16</td>
</tr>
<tr>
<td>Lakes</td>
<td>112</td>
<td>106</td>
<td>91%</td>
<td>95%</td>
</tr>
<tr>
<td>NBGZ</td>
<td>89</td>
<td>89</td>
<td>91%</td>
<td>100%</td>
</tr>
<tr>
<td>Unity</td>
<td>84</td>
<td>84</td>
<td>98%</td>
<td>100%</td>
</tr>
<tr>
<td>WBGZ</td>
<td>81</td>
<td>70</td>
<td>59%</td>
<td>86%</td>
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<tr>
<td>WES</td>
<td>183</td>
<td>187</td>
<td>69%</td>
<td>100%</td>
</tr>
<tr>
<td>Jonglei</td>
<td>119</td>
<td>105</td>
<td>76%</td>
<td>88%</td>
</tr>
<tr>
<td>Warrap</td>
<td>111</td>
<td>106</td>
<td>92%</td>
<td>95%</td>
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<tr>
<td>EES</td>
<td>107</td>
<td>106</td>
<td>88%</td>
<td>99%</td>
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<tr>
<td>RAA</td>
<td>16</td>
<td>6</td>
<td>31%</td>
<td>38%</td>
</tr>
<tr>
<td>CES</td>
<td>122</td>
<td>109</td>
<td>89%</td>
<td>89%</td>
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<tr>
<td>AAA</td>
<td>17</td>
<td>16</td>
<td>94%</td>
<td>94%</td>
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<tr>
<td>Upper Nile</td>
<td>141</td>
<td>109</td>
<td>68%</td>
<td>77%</td>
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<tr>
<td>GPAA</td>
<td>15</td>
<td>15</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>Total</td>
<td>1197</td>
<td>1108</td>
<td>81%</td>
<td>93%</td>
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</table>
Table 2: Timeliness and completeness of reporting by Payam and Partner of IDSR reporting from NGO-run mobile health facilities and private health facilities in Juba and Wau

<table>
<thead>
<tr>
<th>Admin area</th>
<th># Of Reporting Mobile Sites</th>
<th>% Of Timeliness in week 16</th>
<th>% Of Completeness in week 16</th>
<th>Payam</th>
<th># Of Reporting Private Health Facilities</th>
<th>% Of Timeliness in week 16</th>
<th>% Of Completeness in week 16</th>
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</thead>
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<tr>
<td>IMC</td>
<td>4</td>
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<td>100%</td>
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<td>Kator</td>
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<tr>
<td>SSHCO</td>
<td>1</td>
<td>100%</td>
<td>100%</td>
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<td>Marial Baai</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>SMC</td>
<td>1</td>
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<td>100%</td>
<td></td>
<td>Northern Bari</td>
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<tr>
<td>SCI</td>
<td>2</td>
<td>100%</td>
<td>100%</td>
<td></td>
<td>Rajaf</td>
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<td>HFO</td>
<td>3</td>
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<td>100%</td>
<td></td>
<td>Muniki</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>WVI</td>
<td>2</td>
<td>50%</td>
<td>50%</td>
<td></td>
<td>Wau South</td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td>CIDO</td>
<td>1</td>
<td>100%</td>
<td>100%</td>
<td></td>
<td>Wau North</td>
<td>92%</td>
<td>92%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>14</td>
<td>93%</td>
<td>93%</td>
<td></td>
<td>Juba</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>62</td>
<td>95%</td>
<td>95%</td>
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## Epidemic alerts

A total of 276 alerts have been triggered in the EWARS system, with 62% (171/276) verified in the system. The majority of the alerts were for Measles (18%), ABD (17%), AWD (16%), Guinea Worm (14%). It is important to note that there were significant alerts for, Malaria, EBS, ARI and AJIS. This week, Eastern Equatoria, Central Equatoria, Northern Bahr El Ghazal and Western Equatoria states show high alert verification rates. See Table 3 below for more details.

### Table 3: Summary alerts triggered week 16; 2024

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<tbody>
<tr>
<td>AAA</td>
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<td>0</td>
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<tr>
<td>CES</td>
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<tr>
<td>Jonglei</td>
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<tr>
<td>Lakes</td>
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<td>4</td>
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<td>NBGZ</td>
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<tr>
<td>Unity</td>
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<td>4</td>
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<td>Upper Nile</td>
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<td>3</td>
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<td>Warap</td>
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<td>5</td>
<td>7</td>
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<td>3</td>
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<td>Grand Total</td>
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<td>25</td>
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<td>6</td>
<td>3</td>
<td>3</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

#R= reported  
#V= verified  
#=Pending
Weekly Update on Indicator-Based Surveillance (Week 16)

Indicator-based surveillance is implemented in South Sudan through the EWARS platform according to the IDSR 3rd guidelines, where approximately 59 priority diseases and public health events are regularly monitored and reported from health facilities across the country.

Influenza update

Currently, three (3) designated Influenza sentinel surveillance sites in Juba (Juba Teaching Hospital, Al Sabbah Children’s Hospital, Juba Military Hospital) and Rumbek State Hospital in Lakes State are collecting epidemiological data and samples from ILI/SARI cases.

During Epidemiological Weeks 1 to 15 in 2024, a total of 416 ILI/SARI samples have been collected; 390 tested negatives for all pathogens, (22) were positive for COVID-19, zero (1) for Influenza Type A (H3), one (1) for Influenza Type B (Victoria), two (2) for Influenza A/(H1N1)pdm09 and zero (0) for RSV.

![Confirmed Influenza, COVID-19 and RSV cases from sentinel sites](image)

**Figure 1: Indicator-Based Surveillance (IBS) Influenza Surveillance**
## Ongoing confirmed epidemics

Table 4: Summary of new and ongoing confirmed epidemics

<table>
<thead>
<tr>
<th>Aetiologic agent</th>
<th>Location (county)</th>
<th>Date first reported</th>
<th>New cases since last bulletin</th>
<th>Cumulative cases to date</th>
<th>Response activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Surveillance/Lab</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>Case management</td>
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<td>Vaccination</td>
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<td>Health promotion</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>IPC/WASH</td>
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<tr>
<td><strong>Ongoing outbreaks</strong></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Hepatitis E</td>
<td>Twic</td>
<td>Feb 2024</td>
<td>0</td>
<td>2</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Yellow Fever</td>
<td>Yambio, Nzara, Ezo, Tambura, Ibba and Maridi</td>
<td>21 Dec 2023</td>
<td>7</td>
<td>71</td>
<td>Laboratory confirmed</td>
</tr>
<tr>
<td>Measles</td>
<td>69 counties</td>
<td>2022</td>
<td>1411</td>
<td>14,344</td>
<td>ongoing</td>
</tr>
<tr>
<td></td>
<td></td>
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<td>ongoing</td>
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<td>ongoing</td>
</tr>
<tr>
<td>Hepatitis E</td>
<td>Fangak</td>
<td>2023</td>
<td>0</td>
<td>617</td>
<td>ongoing</td>
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<tr>
<td></td>
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<td></td>
<td>0</td>
<td>7</td>
<td>ongoing</td>
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<td>ongoing</td>
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<tr>
<td>cVDPV</td>
<td>Yambio and Juba</td>
<td>19/Dec 2023</td>
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<td></td>
<td>ongoing</td>
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<td>Hepatitis E</td>
<td>Rubkona (Bentiu IDP Camp)</td>
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<tr>
<td>Conjunctivitis</td>
<td>Nimule</td>
<td>8/April</td>
<td>1500</td>
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<td>Ongoing</td>
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</table>

Note: Ongoing outbreaks are ongoing as of the latest report date.
Ongoing Confirmed Outbreaks

Since last year, South Sudan has been witnessing several emergencies across the country based on the data provided by the states and EWARS system, several ongoing disease outbreaks have been reported in most of the Counties ranging from measles, polio and hepatitis E virus and others.

![Map showing ongoing disease outbreaks across the country](image)

Figure 2: Map showing ongoing disease outbreaks across the country
Response activities for ongoing outbreaks

Vaccine-preventable Diseases

1- Meningitis Situation Updates

Currently, a cumulative number of 121 suspected cases including 13 deaths (12% CFR) have been reported between week 4 to week 16, 2024. Furthermore, 5 new cases with zero deaths were reported in Epi-week 15, 2024 most of the cases were reported in Aweil East 25% (18 cases) and Aweil West 19% (14 Cases) of the total reported cases. The most affected age group is 0 – 4 years and the least affected age group is 10 - 14 years.

![Epi curve showing suspected Meningitis cases in NBGZ, Jonglei, WBGZ and Warrap 2024 by date of onset As of 5th May 2024.](image-url)

Figure 3 Distribution of Meningitis cases by Age-group and Location
2- Measles outbreak

As of Epi week 16, 2024, 2,271 suspected measles cases were reported, with 146 (6.4%) lab-confirmed, 39 suspected Measles deaths, and a case fatality rate of 1.7%. In addition to that number, a total of 32 more cases were reported from different areas across the country.

Figure 4: Epi-curve of suspected measles cases against their residential status by Epi week
**Measles vaccination**

As of Epi week 16 in 2024, reactive vaccination efforts have led to county-wide campaigns in Maridi, Mundri East, Tonj North, and Tonj South, vaccinating 138,844 children against Measles. Preparation for the reactive vaccination campaign in all 5 counties of Northern Bahr El Ghazal state is complete and implementation is scheduled from 25th of April 2024. Preparation is underway for 5 outbreak-affected counties in Western Equatoria State to be implemented in the 2nd week of May 2024.

Epi week 16 data shows no ongoing outbreak, but twelve (12) counties reporting suspected/confirmed cases yet to reach the outbreak threshold, warranting further investigation and laboratory validation.

**3- Poliomyelitis**

**Circulating Vaccine Derived Polio Virus type-2 (cVDPV2)**

As of January 31, 2024, two cases of cVDPV2 had been reported from Yambio in Western Equatoria and Juba in Central Equatoria. The cVDPV2 variant, which closely matched the index case from the West Equatoria State, was confirmed after being collected from three healthy children in Western Equatoria. The most recent case of cVDPV2 was reported from Juba County, Central Equatorial State, with the onset of paralysis occurring on November 4, 2023. The lab has a few samples that need to be tested. In response to the nationwide outbreak, a campaign was launched on February 27th, 2024, using the nOPV2 vaccine, which has been completed in most counties. Preliminary data shows 3,310,438 (110%) under-5 Children vaccinated in, Terekeka County started the campaign on started today 30 April 2024 due to COVID-19 vaccination, which was ongoing, when nOPV-2 was being scheduled. Following up with a few Counties with pending data not submitted on ODK.
Water Born Diseases

1- Acute Watery Diarrhea

The table below shows the summary of weekly acute watery diarrhea cases in Renk County, to date Renk County has recorded 132 suspected cholera cases out of which 78 suspected cases were tested for cholera using RDT, five cases were positive, and samples were sent for further confirmatory test all the five samples tested negative using culture and sensitivity test. As part of the cholera preparedness plan in Renk, an active AWD case search is going at TC1&2, RC, Renk Hospital, and health facilities.
Table 5 suspected cholera cases in Renk County.

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<th>#</th>
<th>Indicator</th>
<th>Numbers/percentage</th>
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<td>Cholera (Suspect cases) detected in the week</td>
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<td>2</td>
<td>New cases confirmed</td>
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<td>3</td>
<td>Cumulative cases</td>
<td>132</td>
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<tr>
<td>4</td>
<td>New deaths in the week</td>
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<tr>
<td>5</td>
<td>Cumulative deaths</td>
<td>0</td>
</tr>
<tr>
<td>6</td>
<td>Case fatality Rate</td>
<td>0</td>
</tr>
</tbody>
</table>

2. Hepatitis E Virus in Fangak county Jonglei State

A total of 624 AJS cases, including 22 deaths, have been reported from week 1 of 2023 to week 15 of 2024. Most cases were reported among the age group 15 years and above; Females accounted for 66% (412/624) while Males accounted for 34% (212/624) of cases. The outbreak peaked in week 42 of 2023, with an RDT positivity rate of more than 60%. Until week 52, 2023, and week two of 2024 with four RDT positive cases.

![Epi curve showing Hepatitis E Virus [HEV] cases in Fangak county, wk 1, 2023 to wk 15, 2024.](image-url)

Figure 6: Epi-curve of HEV in Fangak County
3. **Hepatitis E outbreak in Bentiu IDP Camp in Unity State**

Recently 31 new cases were reported including Four RDT positive and zero deaths in week 15, 2024; cumulatively marks a total of 5300 cases including 27 deaths reported since the outbreak began in 2018; 3% of the cases were reported among age group 15 – 44 years; In terms of sex, Male account for 52% (2, 768 cases) while female accounted 48% (2, 501 cases).

![Figure 7: Epicure of HEV in Bentiu IDP camp, Unity State](image-url)
4. Hepatitis E in Western Bahr EL-Ghazal State

A total of 481 cases including 19 deaths have been reported from week 8, 2023 to week 16, 2024. The majority of the cases were reported among the age group 15 years and above; In terms of the distribution of the cases by gender; Males account for 64% (308) while females account for 36% (173).

![Percentage of HEV case distribution by age and sex in WBeG, 2023-2024.](image)

**Figure: 8 Distribution of HEV cases by age and sex**
Hemorrhagic Fever

1- Yellow fever Outbreak

A total of one hundred and fifteen (115) Yellow Fever cases (112 suspected and 3 confirmed) were reported from seven counties in Western Equatoria state: Yambio (57), Tambura (26), Nzara (11), Ezo (11), Ibba (04), Maridi (04) and Mvolo (02) Counties. In Epi week 15 Five (05) new suspected Yellow Fever cases were reported. The suspected cases were reported from Yambio (3), Tambura (1), and Mvolo (1) counties. Suspected 6 deaths were reported, giving a case fatality ratio of 5.2%.

Figure 9: Trend of Yellow fever outbreak in Western Equatoria State
2- Suspected viral Hemorrhagic Fever in Rumbek

A 21-year-old female from Hai Malual Bab in Rumbek Town was reported to a private clinic 24 April 2024 with symptoms of fever headache, generalized body pain, and neck pain followed by nasal and ear bleeding. Alert was notified to CHD, SMOH, and WHO Hub office in Rumbek. Blood samples have been collected, packed, and stored at the State cold chain, ready for sending to NPHL in Juba. Three contacts have been identified and advised to stay in self-isolation.

Red-eye (Conjunctivitis) outbreak In Magwi County

The Ministry of Health, Republic of South Sudan, declared to the general public an outbreak of conjunctivitis, commonly known as red eye disease,” Minister of Health Yolanda Awel Deng Juach stated. This outbreak was first detected among travelers from Uganda where similar cases have been reported and an outbreak of conjunctivitis declared by the Ministry of Health of Uganda,” she advised. Health officials to set up screening at Nimule and other major points of entry. As of April 30, 2024, 1500 suspected cases were screened and managed, with cases also emerging in Juba. The Ministry of Health and partners have implemented measures including hygiene promotion, surveillance, treatment, public awareness campaigns, and healthcare worker training. The public is advised to wash hands frequently, avoid contact with infected persons, refrain from touching eyes or sharing personal items, and seek medical attention for suspected cases.

Other Events

Food insecurity in 2023, severe acute food insecurity impacted an estimated 7.7 million people across 78 counties in South Sudan. This includes 43,000 people facing catastrophe-level food insecurity at Integrated Food Security Phase Classification (IPC) Phase 5, 2.9 million at IPC Phase 4 (emergency-level), and 4.8 million at IPC Phase 3 (crisis-level). Among those affected are 1.4 million malnourished children. For 2024, it is estimated that millions of people will still be unable to meet minimum food needs as food stocks could be depleted by April 2024. Additionally, ongoing sporadic conflicts and the influx of returnees and refugees from Sudan is likely to strain food supplies and incomes further, driving severe malnutrition.

Flooding also remains a concern, in 2023, areas of Upper Nile and Unity states remained under floodwaters, with an estimated 7021 people still displaced in Rubkona.
Next step

- Strengthening active surveillance across the counties boarding with Sudan for a potential cholera outbreak. Surveillance activities will also be strengthened in counties reporting disease outbreaks such as measles, HEV, Yellow Fever, and Circulating Vaccine-Derived Polio Virus type-2 (cVDPV2).
- Training of RRT in Renk
- Support printing of IEC materials for red eye prevention awareness
- Support the ongoing PSH training in Renk County
- Support detailed Measles outbreak investigations and risk assessment (root cause analysis) to understand the persistent outbreaks

Acknowledgments

Thanks to the State Surveillance Officers, Health Cluster partners for sharing the weekly IDSR data. To access the IDSR bulletins for 2024 use the link below: https://www.afro.who.int/countries/south-sudan/publication/south-sudan-weekly-integrated-disease-surveillance-and-response-bulletin-2024