

South Sudan

Integrated Disease surveillance and response (IDSR)

Epidemiological Bulletin Week 24 of 2020 (June 08- June 14)





- In week 24, 2020 IDSR reporting completeness was 92% and timeliness was 63% at health facility level. EWARN reporting completeness was 96% and timeliness was 91%
- Of the 145 alerts in week 24, 2020; 59% were verified 0% were risk assessed and 0% required a response. Malaria (52), AWD (24), ARI (21), measles (4) and bloody diarrhea (28) were the most frequent alerts in week 24, 2020
- New measles cases confirmed in Wau and Bentiu PoC are being responded to through enhanced surveillance and routine immunization.
- A total of 558 COVID-19 alerts have been investigated with 451 being verified.
- Total of 1813 COVID-19 confirmed cases and 31 deaths, CFR of 1.7%



SURVEILLANCE PERFORMANCE



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



IDSR timeliness & completeness performance at county level for week 24 of 20202



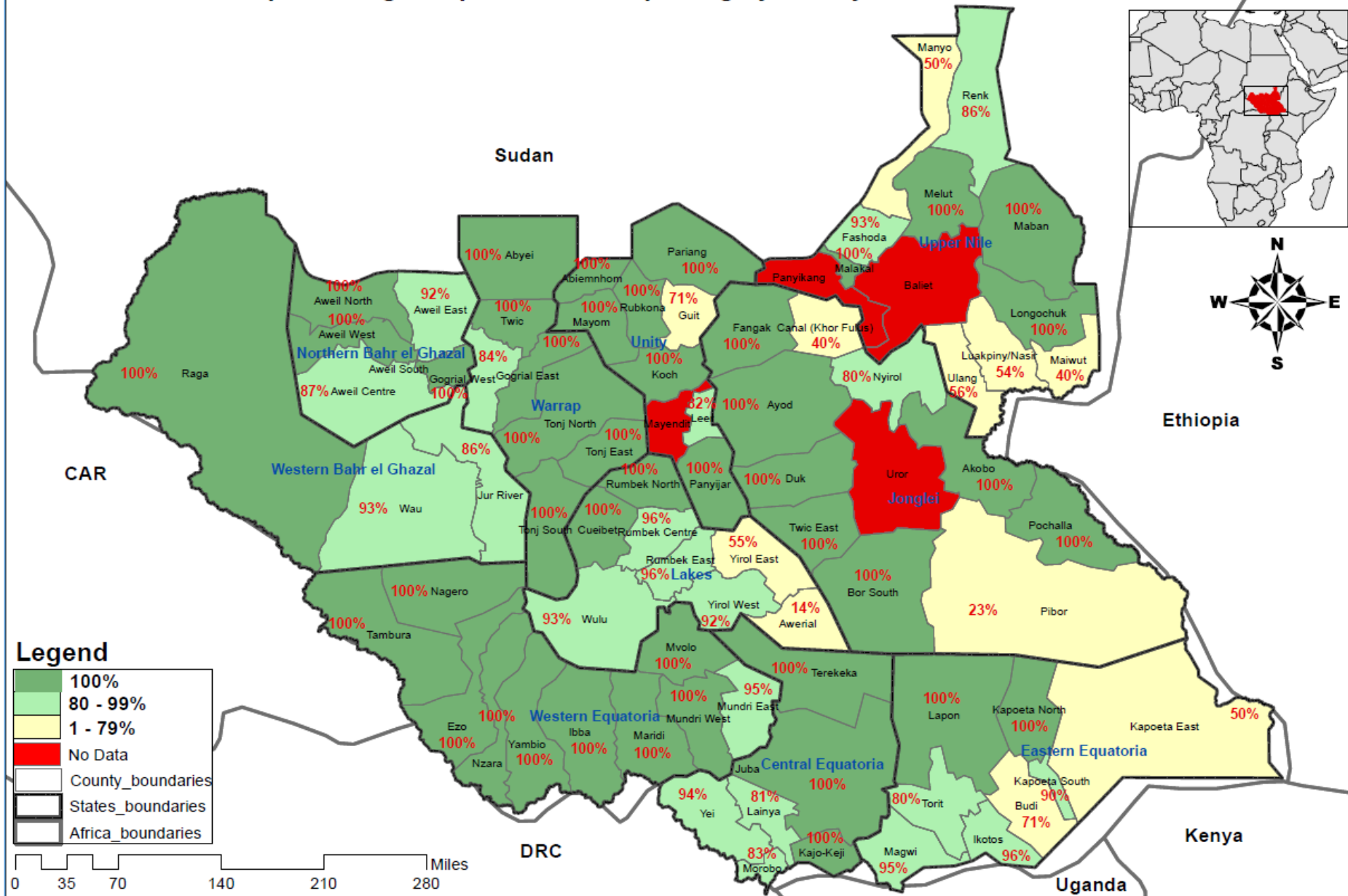
Completeness States Ranking	States	Supporting Partners	Total No. of Functional Health Facilities in the State	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of Time	Completeness Percentage
1st	WES	AMREF, World Vision, CUAMM, CDTY, OPEN	213	36	17%	212	100%
2nd	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	120	114	95%	118	98%
3rd	CES	HLSS, SSUHA, Healthnet TPO, IHO, GOAL, TRI-SS, THESO	117	110	94%	115	98%
4th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	130	101	78%	126	97%
5th	EES	Cordaid, HLSS, CCM	146	95	65%	131	90%
6th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID, Samaritans Purse	115	84	73%	100	87%
7th	WBGZ	Cordaid, Healthnet TPO, CARE International, IOM	76	54	71%	68	89%
8th	Lakes	Doctors with Africa (CUAMM), LIVEWELL	113	58	51%	100	88%
9th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	150	90	60%	128	85%
10th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS	91	60	66%	72	79%
	South Sudan		1271	802	63%	1170	92%

KEY

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

The timeliness of IDSR reporting (supported by EWARS mobile) at health facility level was 63% and completeness was 92%. All states except Unity were above the target of 80% with highest reporting rate in WES with completeness of 100%.

Map showing completeness of reporting by county in week 24, 2020.



Disclaimer: The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

IDSR timeliness & completeness performance at county level for week 24 of 2020 (1)



STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Lakes	Cueibet	Doctors with Africa (CUAMM)	15	15	100%	15	100%
NBGZ	Aweil North	Health NetTPO,IHO	33	33	100%	33	100%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	16	16	100%	16	100%
CES	Morobo	SSUHA,THESO	5	5	100%	5	100%
CES	Terekeka	HealthNetTPO	20	20	100%	20	100%
CES	Yei	SSUHA	17	16	94%	16	94%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	21	91%	22	96%
CES	Juba	HLSS	45	40	89%	45	100%
WBGZ	Wau	Cordaid	27	24	89%	26	96%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	13	87%	13	87%
CES	Lainya	SSUHA	16	13	81%	13	81%
Lakes	Wulu	Doctors with Africa (CUAMM)	14	11	79%	14	100%
NBGZ	Aweil East	IRC,TADO	36	28	78%	34	94%
NBGZ	Aweil West	HealthNetTPO	37	27	73%	37	100%
WBGZ	Jur River	Cordaid	35	25	71%	30	86%
WBGZ	Raja	HealthNetTPO	14	5	36%	12	86%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	6	25%	23	96%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	2	18%	7	64%
Lakes	Yirol West	Doctors with Africa (CUAMM)	12	2	17%	11	92%
Lakes	Awerial	Doctors with Africa (CUAMM)	7	1	14%	1	14%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	0	0%	7	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	0	0%	9	100%

STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Unity	Mayom	CASS	9	9	100%	9	100%
Unity	Panyijjar	IRC	15	14	93%	15	100%
Unity	Rubkona	Cordaid,IRC,IOM,MSF	15	13	87%	14	93%
Unity	Leer	UNIDOR	11	9	82%	9	82%
Unity	Koch	CRADA,IRC.	5	4	80%	4	80%
Unity	Abiemnhom	Cordaid	4	3	75%	4	100%
Unity	Pariang	CARE International	11	8	73%	11	100%
WES	Ezo	World Vision International	27	18	67%	27	100%
WES	Ibba	AMREF	11	7	64%	11	100%
WES	Tambura	World Vision International	26	6	23%	26	100%
WES	Nzara	World Vision International	20	3	15%	20	100%
WES	Mvolo	CUAMM	11	1	9%	11	100%
WES	Mundri West	CUAMM	21	1	5%	21	100%
WES	Nagero	World Vision International	10	0	0%	10	100%
WES	Maridi	AMREF	26	0	0%	26	100%
WES	Yambio	World Vision International	42	0	0%	42	100%
WES	Mundri East	CUAMM	19	0	0%	18	95%
Unity	Guit	CHADO	7	0	0%	5	71%
Unity	Mayendit	CASS	12	0	0%	0	0%

IDSR timeliness & completeness performance at county level for week 24 of 2020 (2)



STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Jonglei	Bor	MDM + JDF	35	35	100%	35	100%
Jonglei	Pochalla	LIVEWELL	7	7	100%	7	100%
Jonglei	Twic East	MDM + JDF	11	9	82%	11	100%
Jonglei	Duk	MDM + JDF	15	12	80%	15	100%
EES	Kapoeta South	CCM	10	8	80%	10	100%
Jonglei	Nyiroi	CMA,Malaria Consortium	10	8	80%	9	90%
EES	Magwi	HLSS	22	17	77%	20	91%
Jonglei	Fangak	CMD,HFO	16	12	75%	16	100%
EES	Ikotos	HLSS	27	19	70%	26	96%
EES	Budi	Cordaid	21	13	62%	20	95%
Jonglei	Pibor	LIVEWELL,CRADA	5	3	60%	3	60%
EES	Lopa Lafon	HLSS	18	10	56%	18	100%
EES	Torit	Cordaid	20	11	55%	16	80%
Jonglei	Canal Pigi	IMC	11	4	36%	4	36%
Jonglei	Ayod	CMD,EDA	15	0	0%	15	100%
Jonglei	Akobo	NILE HOPE	8	0	0%	8	100%
Jonglei	Uror	Nile Hope,Malaria Consortium	8	0	0%	5	63%

STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HFs Reported on Time	Timeliness Percentage	No. of HFs Reported regardless of time	Completeness Percentage
Warrap	Gogrial East	GOAL	15	16	107%	17	113%
Warrap	Abyei	AAA Save the Children,MSF	10	10	100%	10	100%
Warrap	Tonj East	CCM	12	12	100%	12	100%
Warrap	Tonj North	CCM	14	14	100%	14	100%
Warrap	Tonj South	CCM	12	12	100%	12	100%
Upper Nile	Melut	WVI + RI	8	8	100%	8	100%
Upper Nile	Longechuk	RI	9	9	100%	9	100%
Warrap	Twic	GOAL	26	25	96%	25	96%
Upper Nile	Renk	WVI + RI	14	12	86%	12	86%
Warrap	Gogrial West	GOAL	31	25	81%	28	90%
Upper Nile	Makal	IMC	8	6	75%	7	88%
Upper Nile	Maban	WVI,RI,Samaritans Purse	16	11	69%	16	100%
Upper Nile	Fashoda	CORDAID	14	8	57%	13	93%
Upper Nile	Ulang	UNKEA,RI	18	10	56%	10	56%
Upper Nile	Luakiny Nasir	UNKEA,RI	26	14	54%	16	62%
Upper Nile	Maiwut	RI	10	4	40%	4	40%
Upper Nile	Manyo	CORDAID	8	2	25%	4	50%
Upper Nile	Akoka	IMC	5	0	0%	1	20%
Upper Nile	Baliet	IMC	5	0	0%	0	0%
Upper Nile	Panyikang	IMC	4	0	0%	0	0%



Surveillance: EWARS performance indicator by partner for week 24 of 2020

PARTER	# OF SITES	# of reports received on Time	No. of HF's Reported regardless of time	Timeliness	Completeness
IRC	1	1	1	100%	100%
Medair	2	2	2	100%	100%
GOAL	2	2	2	100%	100%
HFO	1	1	1	100%	100%
UNH	2	2	2	100%	100%
TRI-SS	2	2	2	100%	100%
IMC	5	5	5	100%	100%
IOM	10	10	10	100%	100%
World Relief	2	2	2	100%	100%
MDM	10	9	9	90%	90%
HAA	4	3	3	75%	75%
SMC	6	4	6	67%	100%
UNIDOR	2	1	1	50%	50%
MSF-E	6	2	6	33%	100%
RHS	3	1	1	33%	33%
IMA	9	2	9	22%	100%
CMD	1	0	1	0%	100%
THESO	1	0	0	0%	0%
TOTAL	69	49	63	71%	91%

Completeness was 91% and timeliness was 71% for weekly reporting in week 24, 2020 for partner-supported clinics serving IDP sites.

EVENT-BASED SURVEILLANCE



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





State	Acute jaundice syndrome	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	Bloody Diarrhoea	Malaria (Confirmed)	Measles	Neonatal Tetanus	Yellow Fever	Guinea Worm	Total alerts
CES	4		8	4						16
EES		2	9	11	3			2		27
Jonglei		8	3		5					16
Lakes		1			1					2
NBGZ		2	2	3	1	1			1	10
Unity	2	1		2	9	1				15
Upper Nile		1		4	4		1		2	12
Warrap			2	2	2	2	2		2	12
WBGZ				2	4					6
WES		6			23					29
Total alerts	6	21	24	28	52	4	3	2	5	145

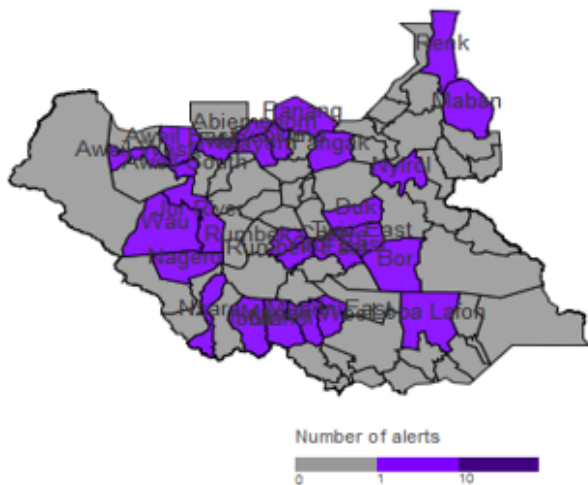
During this week:

- **6 AJS alert: 4 are undergoing verification, 2 under monitoring**
- **21 ARI: all are undergoing verification**
- **24 AWD alert: 22 are undergoing verification, 2 been monitored.**
- **28 ABD: 25 undergoing verification, 3 been monitored.**
- **52 Malaria alerts: 44 undergoing verification, 8 under monitoring.**
- **3 Neonatal Tetanus alert: 2 are undergoing verification, 1 under monitoring**
- **5 Guinea Worm alert: all are undergoing Verification.**
- **4 Measles alert: 3 are undergoing Verification and 1 under monitoring**
- **2 Yellow Fever alert: all undergoing Verification.**

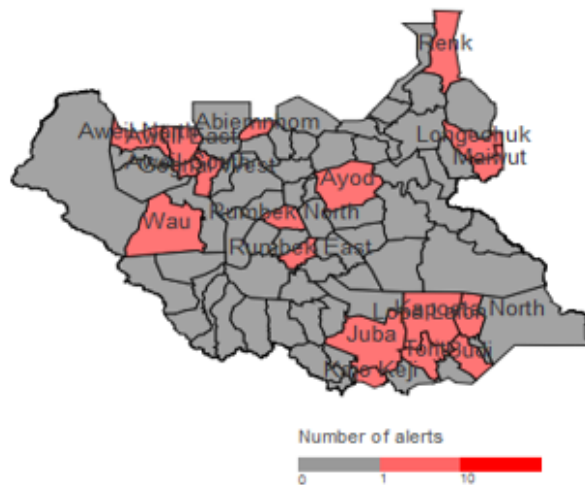
Alert: Map of key disease alerts by county of week 24 of 2020



Map 2a | Malaria (W24 2020)



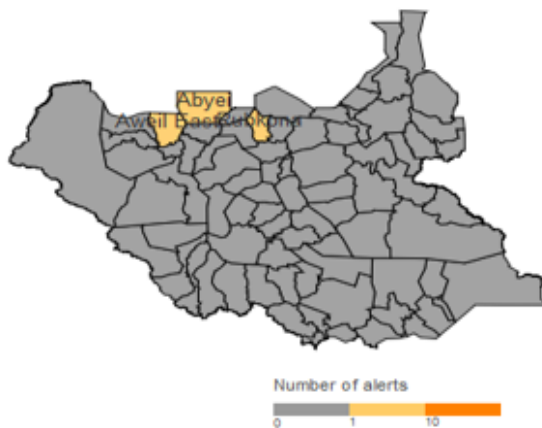
Map 2b | Bloody diarrhoea (W24 2020)



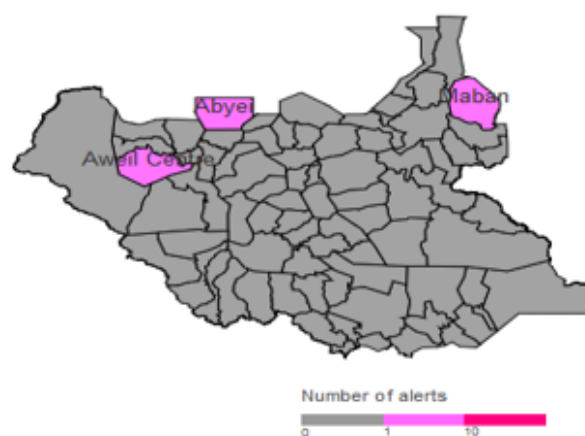
59%	77%	% verified
0%	0%	% auto-discarded
0%	2%	% risk assessed
0%	2%	% requiring a response

W24	Cumulative (2020)	
0	10	Low risk
4	4	Medium risk
0	24	High risk
0	51	Very high risk

Map 2c | Measles (W24 2020)

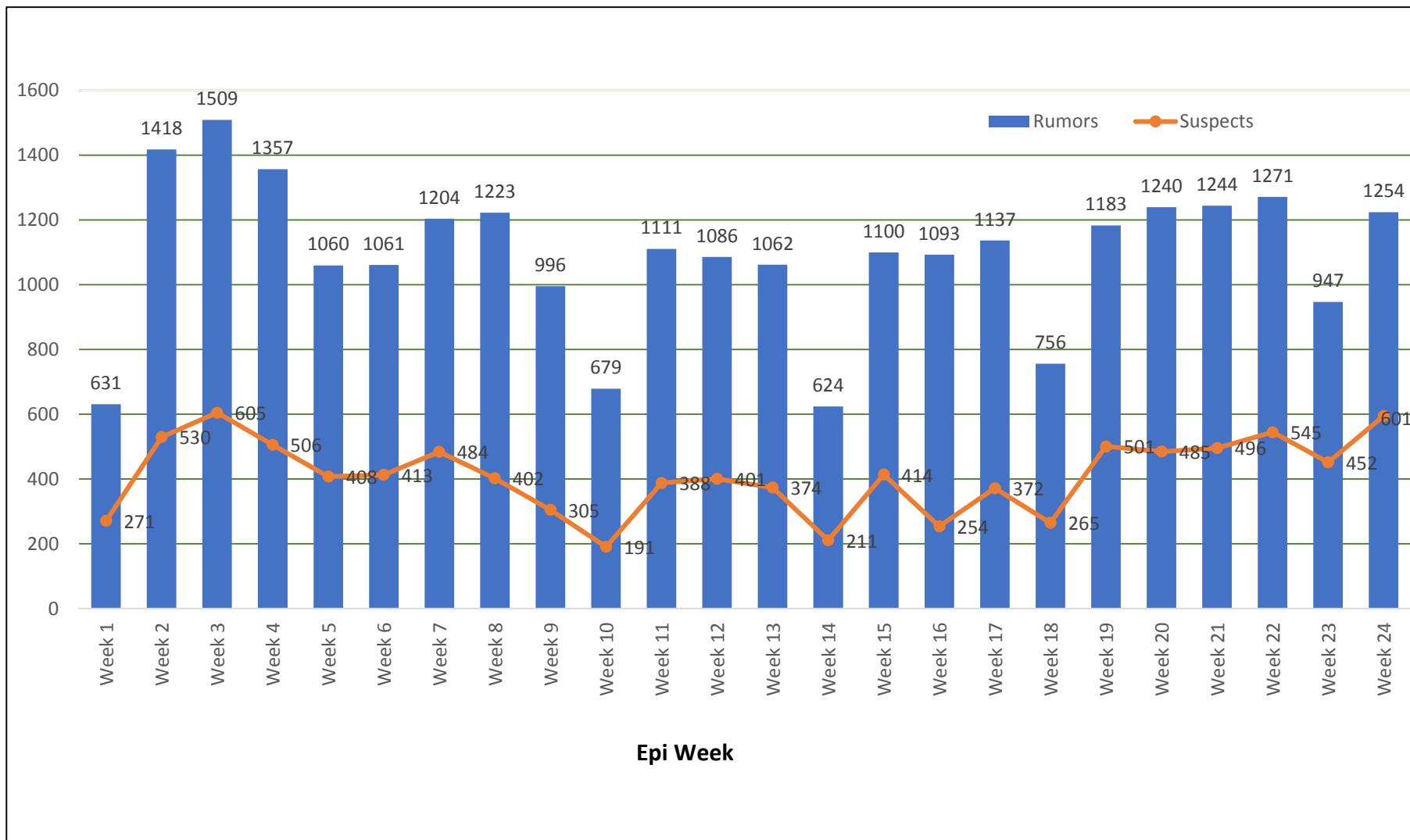
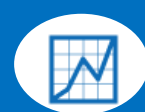


Map 2e | Guinea Worm (W24 2020)



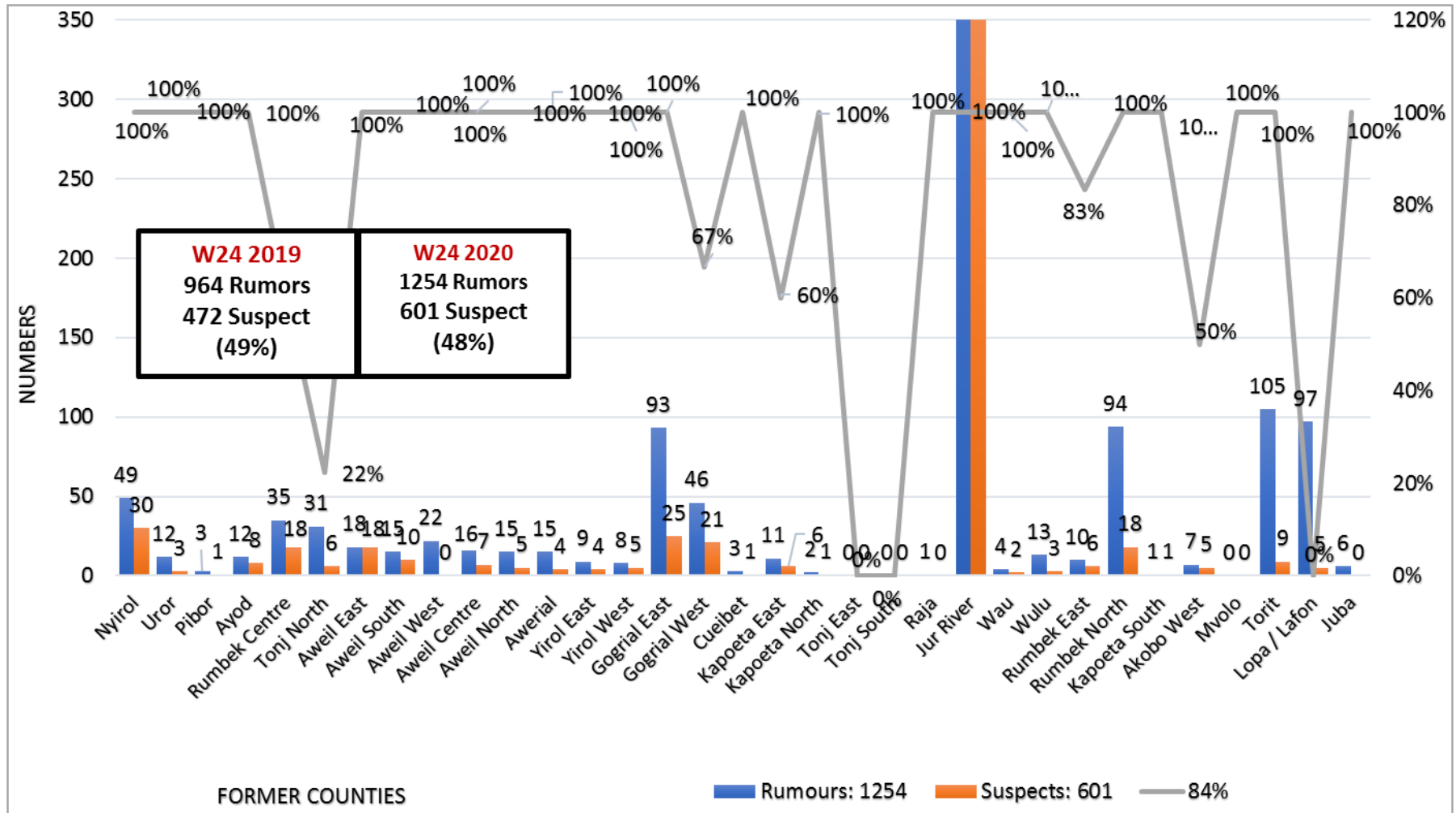
I

Guinea Worm (1): CUMULATIVE: Guinea Worm Rumors and Suspects Week1-Week 24, 2020 (N=26,246 Rumors, 9,874 Suspects (37.6%))



There is an Increased Number of Rumors and Suspects Reported in Week 24 Compared to Week 23

Former Counties that reported Rumors, and Suspects during 7th Jun – 13th June 2020 Week) (n=32)

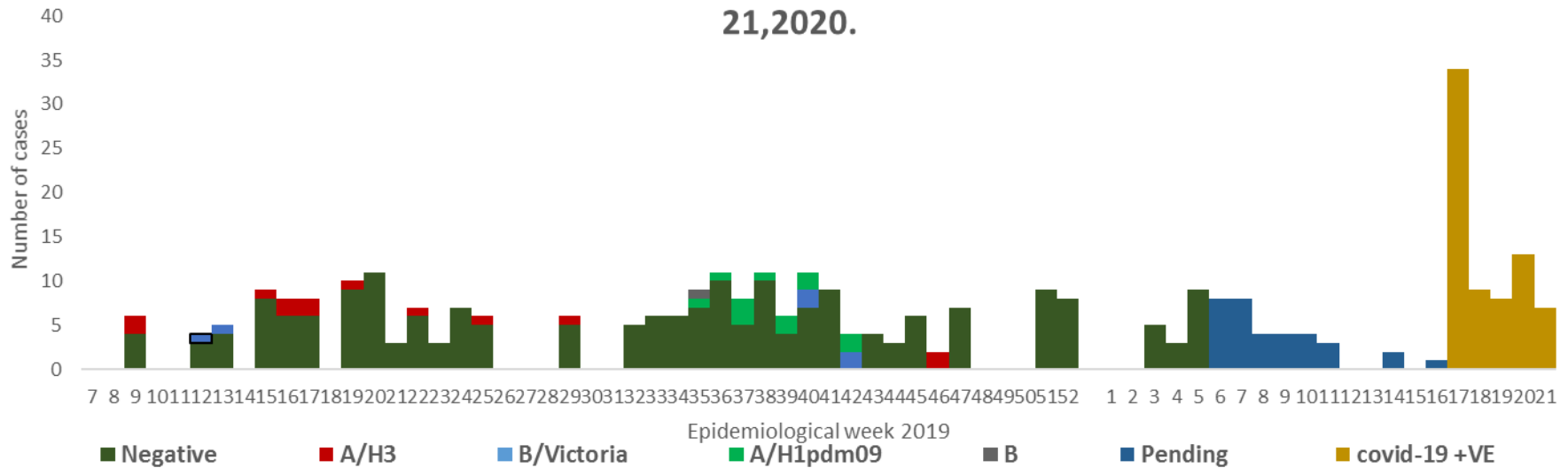


The Reporting Rate for Week 24 Stands at 84%





Influenza & COVID-19 isolates from sentinel sites in Juba, wk 7, 2019 to wk 21,2020.



- In week 7, 2019, South Sudan started case-based surveillance for Influenza Like Illness (ILI) and Severe Acute Respiratory Infection (SARI) cases through systematic collection of epidemiological and virological information.
- There are currently 45 designated sentinel surveillance sites in Juba that are collecting epidemiological data and samples from ILI/SARI cases
- In 2019, a total of 309 ILI/SARI samples have been collected and tested in UVRI 228 being negative; 6 positive for Influenza B (Victoria); 13 positive for Influenza A (H3); and 12 positive for Influenza A (H1)pdm09 and (50) samples are pending test results .
- in week 21 of 2020 the sentinel sites collected 1784 samples and are being tested in country,360 samples tested negative for COVID-19,81 samples tested positive for COVID-19 and 1,343 samples are pending test results.

SUSPECTED OUTBREAKS



Major suspected outbreaks in South Sudan in
2020





Malaria was the leading cause of morbidity and mortality, accounting for **43.3%** of all morbidities and **21.6%** of all mortalities in week 16, 2020

There is one County with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

- **Warrap hub (Tonj)**

Proposed public health actions:

1. Malaria taskforce of malaria technical working group meeting to ensure that operational readiness for malaria prevention, diagnosis, and treatment are optimized.
2. Field missions to conduct technical verification of the trends in the affected counties
3. Assessment of current stock levels of malaria diagnostics (RDTs), medicines (ACTs), and LLINs.
4. Stocking up on malaria prevention (LLINs), diagnostics (RDTs), medicines (ACTs), and enhancing behavioral change communication for malaria prevention, prompt investigation and treatment



ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS



Brief epidemiological description and public health response for active outbreaks and public health events





S/N	County	No. of Samples	Lab Results	
			Measles IgM +ve	Rubella IgM +ve
1	Kapoeta South	1	1	0
2	Wulu	1	0	1
3	Nzara	6	2	2
4	Tambura	4	0	3
5	Gogrial West	1	0	1
6	Jur River	2	0	1
7	Wau	5	3	1
8	Kapoeta East	1	0	0
9	Budi	2	1	0
10	Leer	1	0	1
11	Abyei	1	0	0
12	Lopa	1	0	0
13	Rubkona (Bentiu PoC)	4	3	1
14	Torit	1	0	0
15	Lainya	1	0	0
16	Yambio	1	0	1
Total		33	10	12

- A total of 33 measles samples release in June
- 10 samples are Measles IgM positive and 12 Rubella IgM positive
- Measles outbreak in Wau County
- Rubella outbreak in Tambura County





Aetiological agent	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
					Case management	Vaccination	Health promotion	WASH
Ongoing epidemics								
Hepatitis E	Bentiu PoC	03/01/2018	10	320 (0.031)	Yes	No	Yes	Yes
Measles	Bentiu PoC	24/04/2019	2	474 (0.004)	Yes	Yes	Yes	N/A
Measles	Aweil East	29/12/2019	17	664 (0.127)	Yes	No	Yes	N/A





● Measles outbreaks confirmed in 2020

□ 5 counties – Tonj East, Magwi, Bor, Kapoeta East and Tonj South

□ Locations with ongoing measles transmission

- Aweil East
- Bentiu PoC

□ New confirmed measles cases

- Wau County
- Bentiu PoC



Measles Outbreak situation & response by county as of week 24, 2020

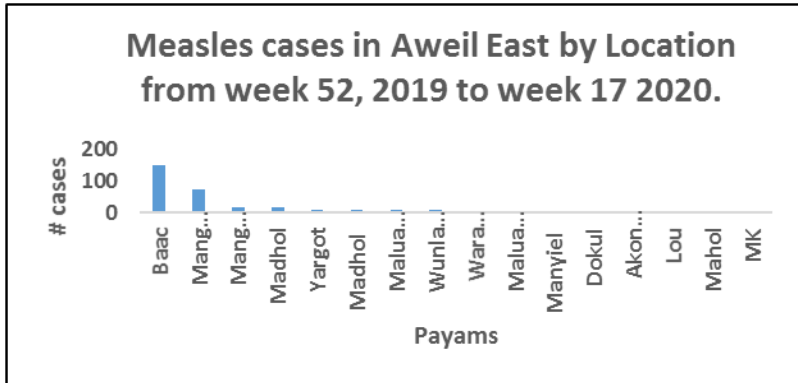
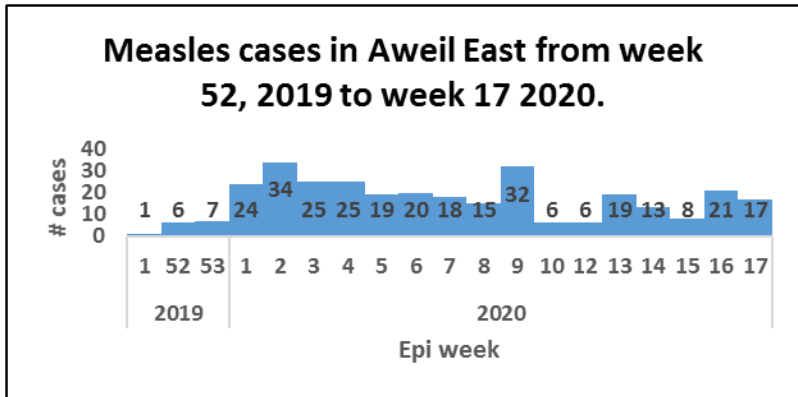


S/N	County	Population	Confirmed cases	Probable cases	Total cases	Cases per 100,000	Total deaths	CFR %	Date first reported	Emergency Campaign	Admin Coverage	Implementing Partner	Status	Comments
1	Tonj East	183,233	13	48	61	33.3	0	0	12-Dec-19	Mass Campaign	Pending result	Mass Campaign	controlled	Mass Campaign Completed
2	Magwi	272,880	5	5	10	3.7	0	0	19-Sep-19	Mass Campaign	Pending result	Mass Campaign	controlled	Mass Campaign Completed
3	Bor	320,956	7	7	14	4.36	0	0	17-Jan-19	Mass Campaign	115.60%	Mass Campaign	controlled	Mass Campaign Completed
4	Kapoeta East	262,720	6	10	16	6.1	0	0	18-Jan-20	Reactive Campaign (Jebel Boma)	Reactive Campaign to start on 26 Feb 2020	IRC	active	Reactive Campaign completed in March 2020
5	Aweil East	519,537	16	195	316	39.4	0	0	2-Jan-20				active	Reactive campaign started on 22 June 2020
6	Bentiu Poc	115,479			474	83	2	2	1-Jan-19	Reactive campaign	126%	IOM	Active	Reactive campaign 20 Jan 2020
7	Wau	271,975	3	0	22	8.1	0	0	14-Jan-20	Enhanced routine immunization	N/A		Active	Enhanced surveillance
Total		1,427,243	50	265	879	61.6	2	0.23						





Confirmed Measles Outbreak in Aweil East County



Age group	Cases	% Cases	Cum. %
0 - 4 Years	160	51%	51%
15+ Years	66	21%	72%
5 - 9 Years	49	16%	87%
10 - 14 Years	41	13%	100%
Grand Total	316	100%	

Descriptive Epidemiology:

- Initial cases were reported on 2nd Jan 2020
- A total of 316 suspected measles cases have been line listed in Aweil East county
- Majority of the cases were from Baac and Mangartong payams
- 17 new cases were reported in week 17, 2020
- (160) 51% of the cases are less than 5 years of age
- Male were 56% of cases and female were 44%

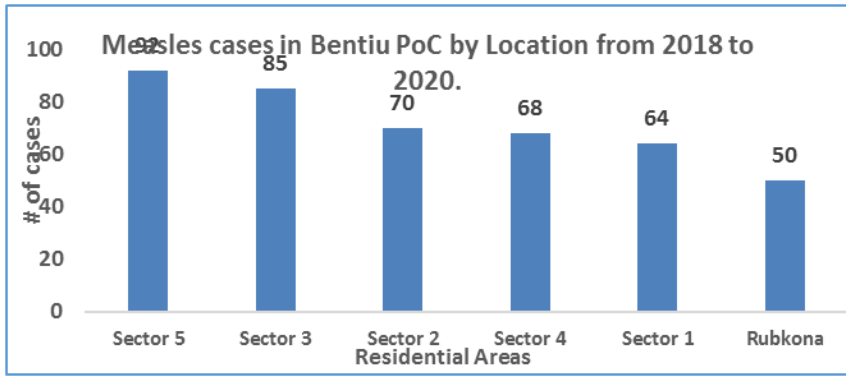
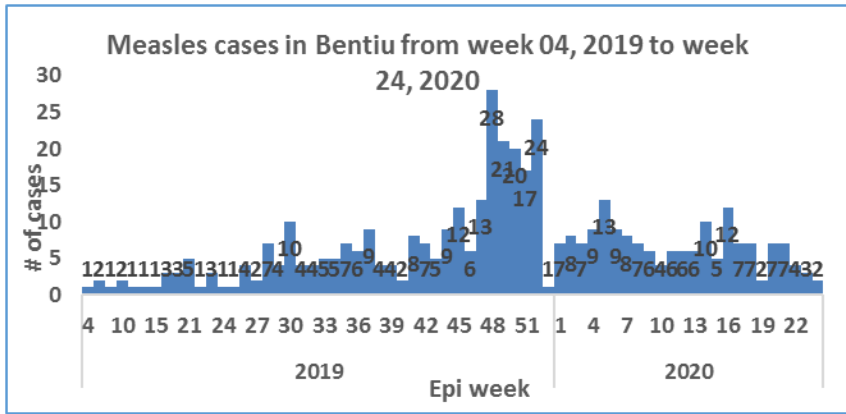
Response Update:

- Reactive campaign was finalized in Aweil East on 24th January 2020 by SMOH and IOM, coverage was 119% and PCE coverage was 91.5%.
- MFUP campaign will start on 22nd June for 7 days, targeting children under five years of age. All payams of Aweil East were covered. Campaign administrative coverage will be shared





Confirmed Measles Outbreak in Bentiu PoC



Age Group	Cases	Percentage	Cum. %
0 - 4 Years	449	95%	95%
5 - 9 Years	14	3%	98%
10 - 14 Years	7	1%	99%
15+ Years	4	1%	100%
Grand Total	474	100%	

Epidemiological description

- Bentiu PoC has been reporting suspected measles/rubella cases since week 4 of 2019.
- 2 new cases reported in week 24, 2020
- At least 474 measles cases including 1 death (CFR 0.23%) reported since then.
- Cumulatively, 36 tested cases have tested measles IgM positive while 15 tested rubella IgM positive.
- 48% of cases are female and 52% are male
- 95% are under 5 yrs old, 5% are 5 yrs old and above
- Cases have been reported from inside and outside the PoC with most of the cases originating from the PoC (most cases from sector 5 but generally all the sectors are affected).

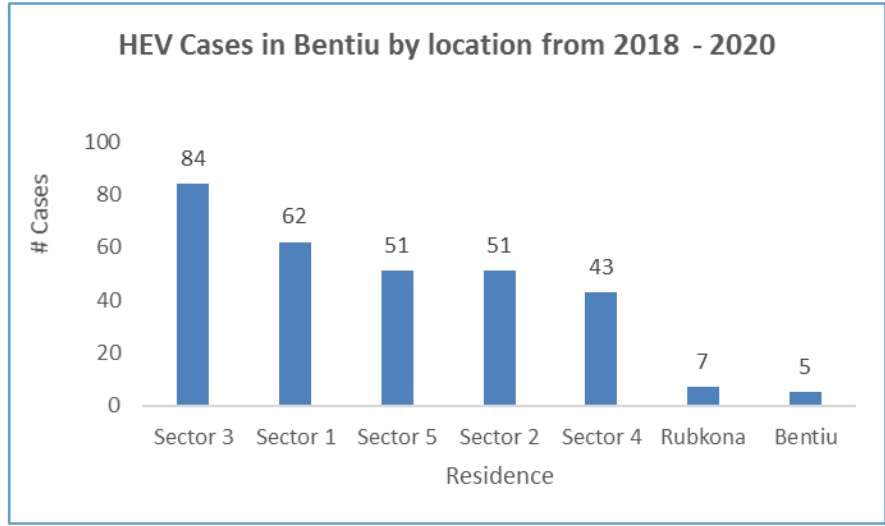
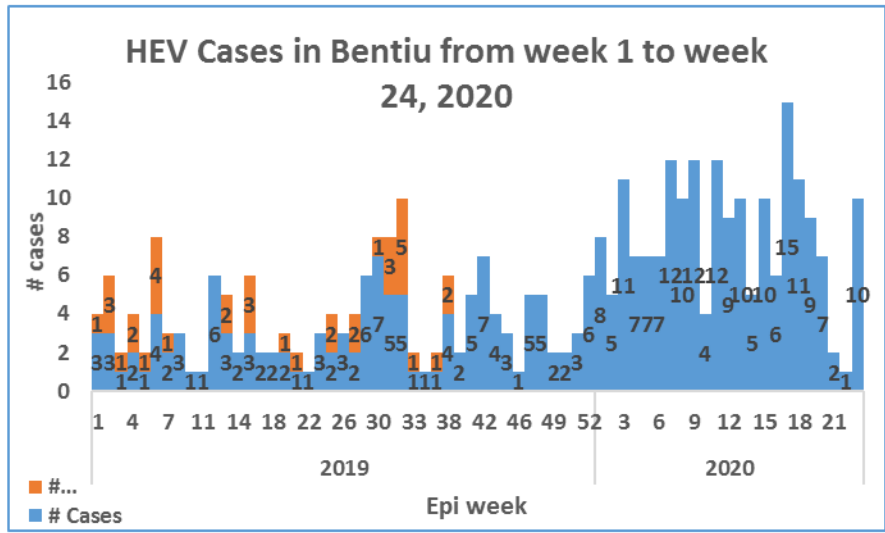
Response actions

- Several rounds of reactive campaigns were conducted in Bentiu IOM:
 - IOM completed a reactive campaign in Bentiu POC on 31 May 2019, with 21,285 children 6-59 months and coverage of 126% receiving measles vaccination. PCE was done by MoH & WHO, coverage was 74.6%.
 - Another campaign was conducted by SMOH, IOM and partners which was completed during the week of 20th January 2020 with coverage of 126%.
 - Partners to strengthen routine immunization to continue to collect samples from suspect cases.
 - Measles case management to continue





Hepatitis E, Bentiu PoC (1)



Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 320 cases since beginning of 2019
- There were (10) new cases reported in week 24, 2020
- All the cases were managed as outpatient cases except for seven cases who were admitted
- Two deaths one on 12th, April 2019 and the second on 11th July 2019
- 50% are female and 50% are male.
- Age group less than 15 years had the most cases with (75%) 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 24, 2020; there were 320 cases of HEV in Bentiu PoC including 4 deaths (CFR 0.012%)

Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	105		105	33%	0%	33%
10 - 14 Years	50		50	16%	0%	48%
15+ Years	77	2	79	25%	3%	73%
5 - 9 Years	84	2	86	27%	2%	100%
Grand Total	316	4	320	100%	0.01	



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 Jerrycans 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





Aetiological agent	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
					Case management	Vaccination	Health promotion	WASH
Controlled epidemics								
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



EBOLA VIRUS DISEASE[EVD] PREPAREDNESS IN SOUTH SUDAN



Brief on the Ebola situation in DR Congo and updates on EVD preparedness in South Sudan





Current situation

- Currently as of 14th June 2020
- 3462 Cases [3319 confirmed & 143 probable]
- 2280 Deaths [2186 confirmed & 94 probable]

Response update

- no new confirmed cases of EVD have been reported since 27 April 2020.



Novel Coronavirus





Situation update as of 17 June, 2020

Situation in numbers (by WHO Region)

Total (new cases in last 24 hours)

Globally	7 941 791 cases (118 502)	434 796 deaths (3 255)
Africa	181 903 cases (6 400)	4 235 deaths (124)
Americas	3 841 609 cases (60 071)	203 574 deaths (1 726)
Eastern Mediterranean	796 759 cases (18 559)	17 558 deaths (481)
Europe	2 434 184 cases (17 264)	188 779 deaths (429)
South-East Asia	486 673 cases (15 281)	13 409 deaths (482)
Western Pacific	199 922 cases (927)	7 228 deaths (13)

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



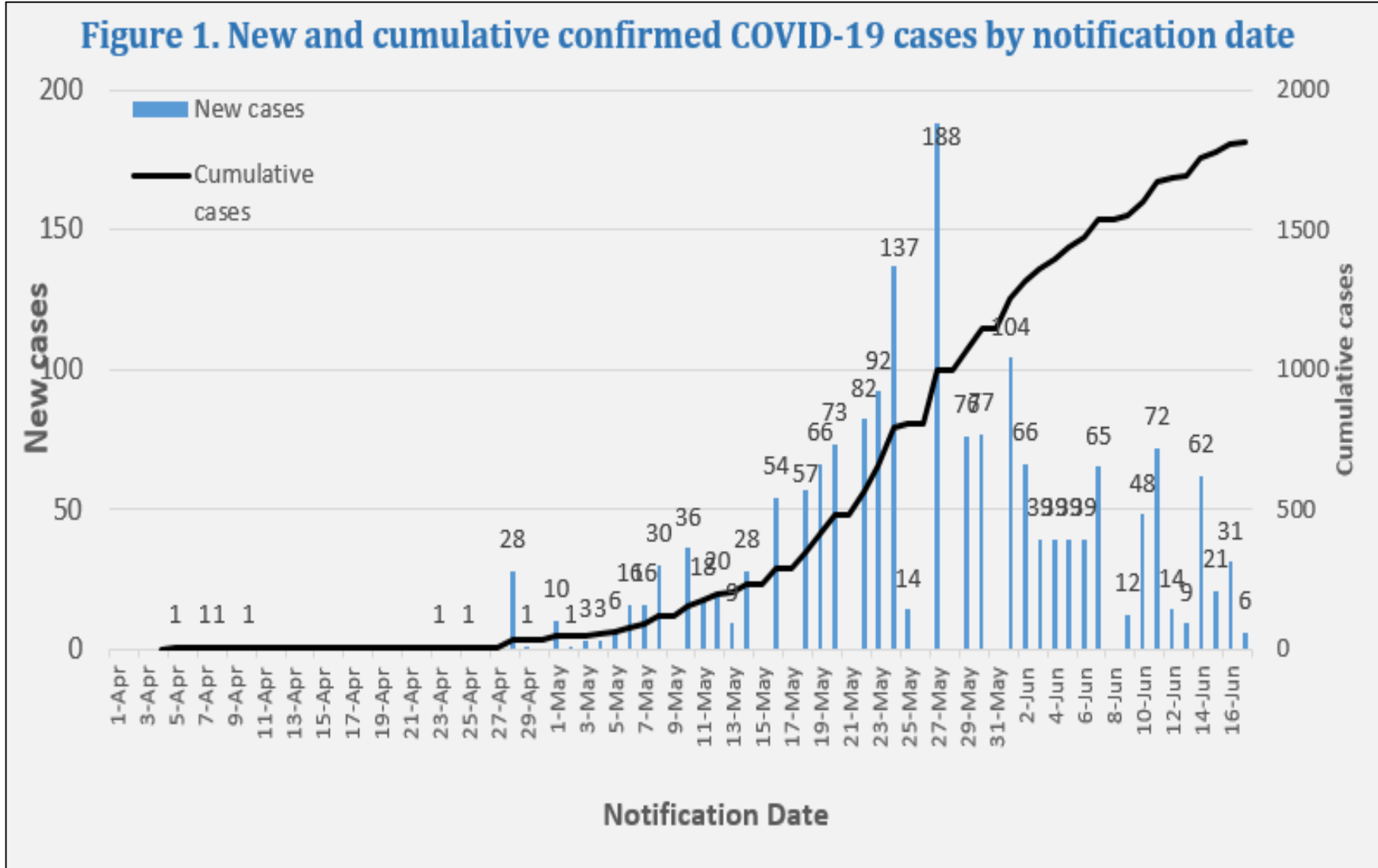


- 1913 confirmed COVID-19 cases in South Sudan; 85% in Juba; with 4050 contacts identified, quarantined, & undergoing follow up
- Active surveillance is ongoing to determine if there is active transmission in Juba and surrounding areas.
- The ILI/SARI sentinel sites have been expanded from 10 to 45 in Juba
- Implementation of priorities; risk communication; active case search and testing; quarantine for contacts; infection prevention and control; and management of cases are currently underway
- The overall response currently led by the COVID-19 high level taskforce and the COVID-19 steering committee





Trends of COVID-19 cases in South Sudan

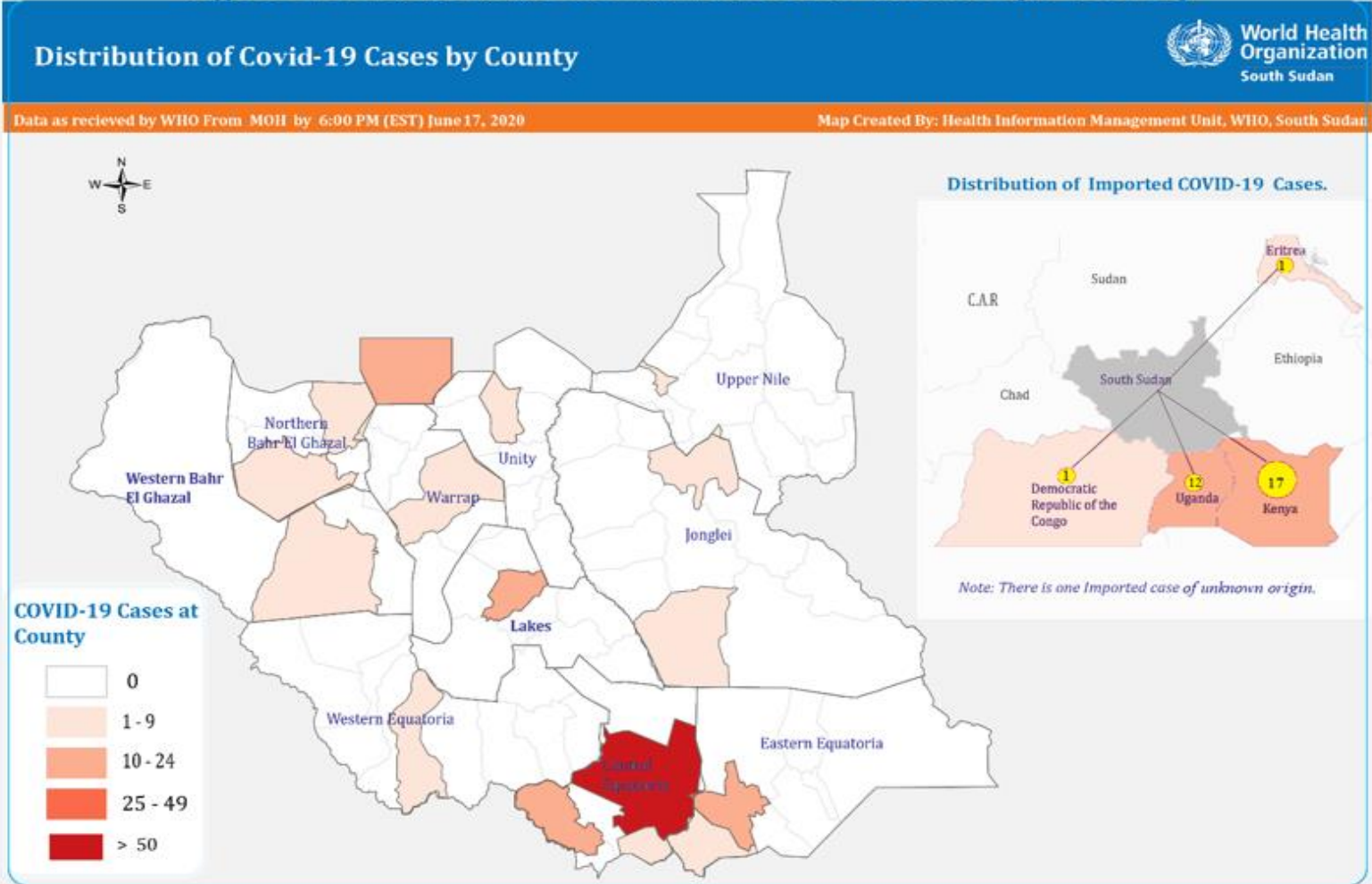


COVID-19 cases increasing exponentially in the past 10 days

Distribution of COVID-19 cases in South Sudan



Figure 2. Distribution of confirmed COVID-19 cases (n=1 812*)



*Geographical information is available for 1 812 cases.

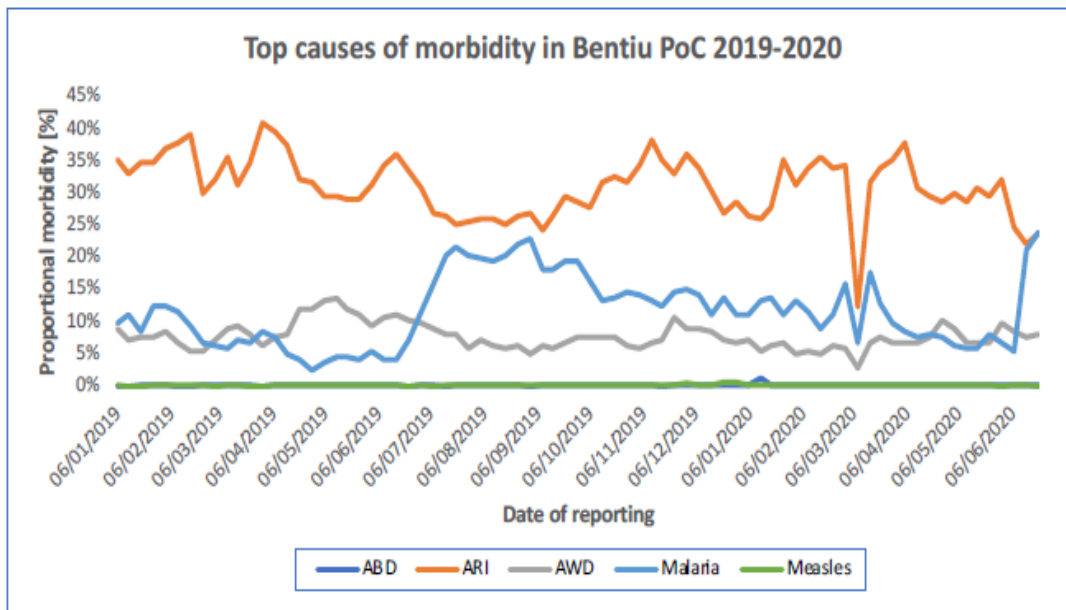
The majority of the cases have been reported in Juba; one case in Torit ; while the rest have been imported (involving truckdrivers from the neighboring countries)

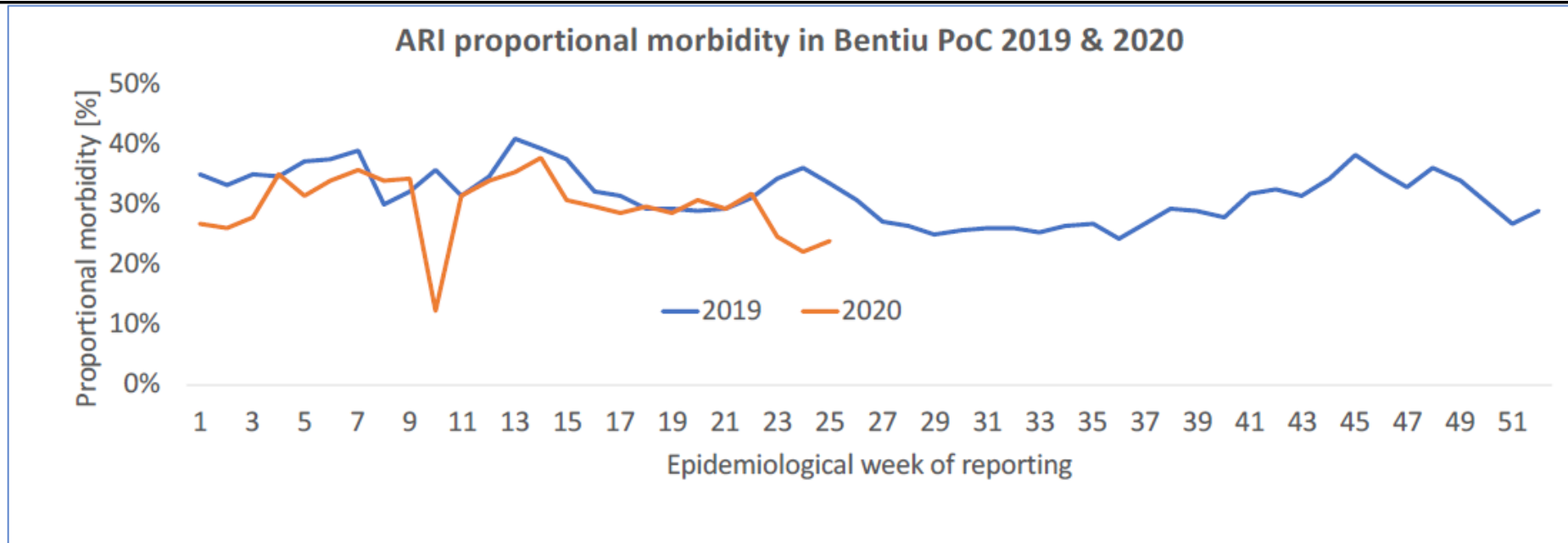
Morbidity & mortality trends in PoC sites, South Sudan (IDSR/EWARN data)





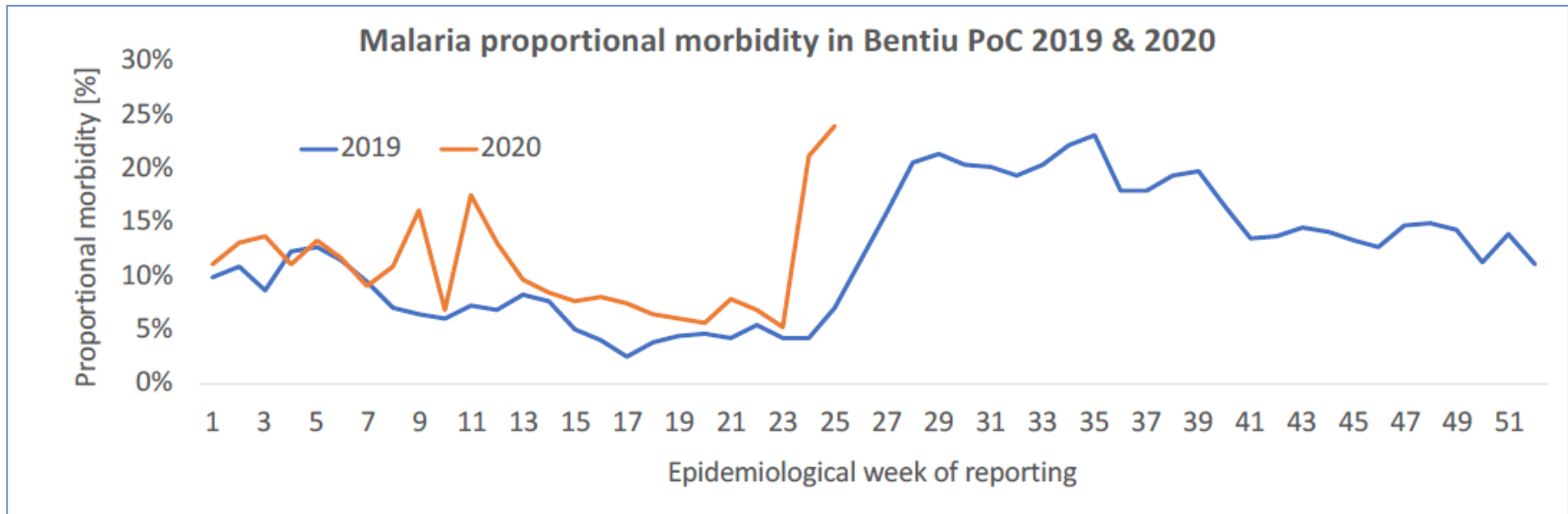
- ARI top cause of morbidity followed by malaria & AWD since wk 1, 2020
- ARI currently accounts for 25% of the total OPD consultations
- Malaria proportional morbidity risen from 5% in wk 24 to 24% in wk 25, 2020





ARI proportional morbidity in 2020 comparable or lower when compared to the corresponding period of 2019



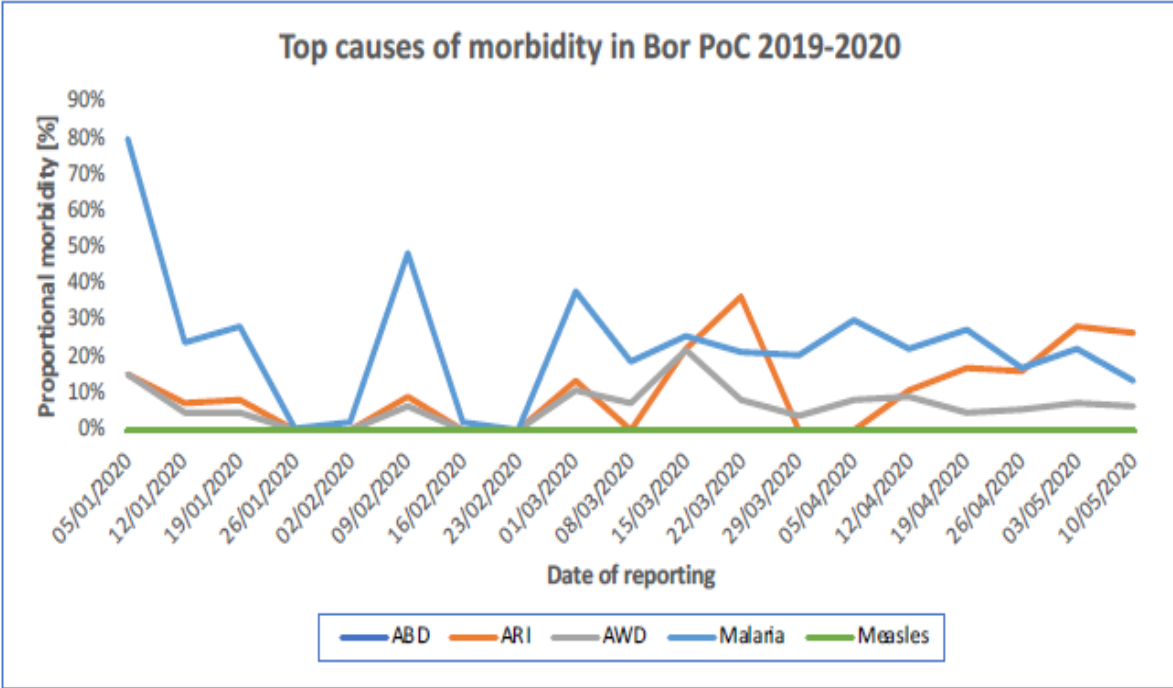


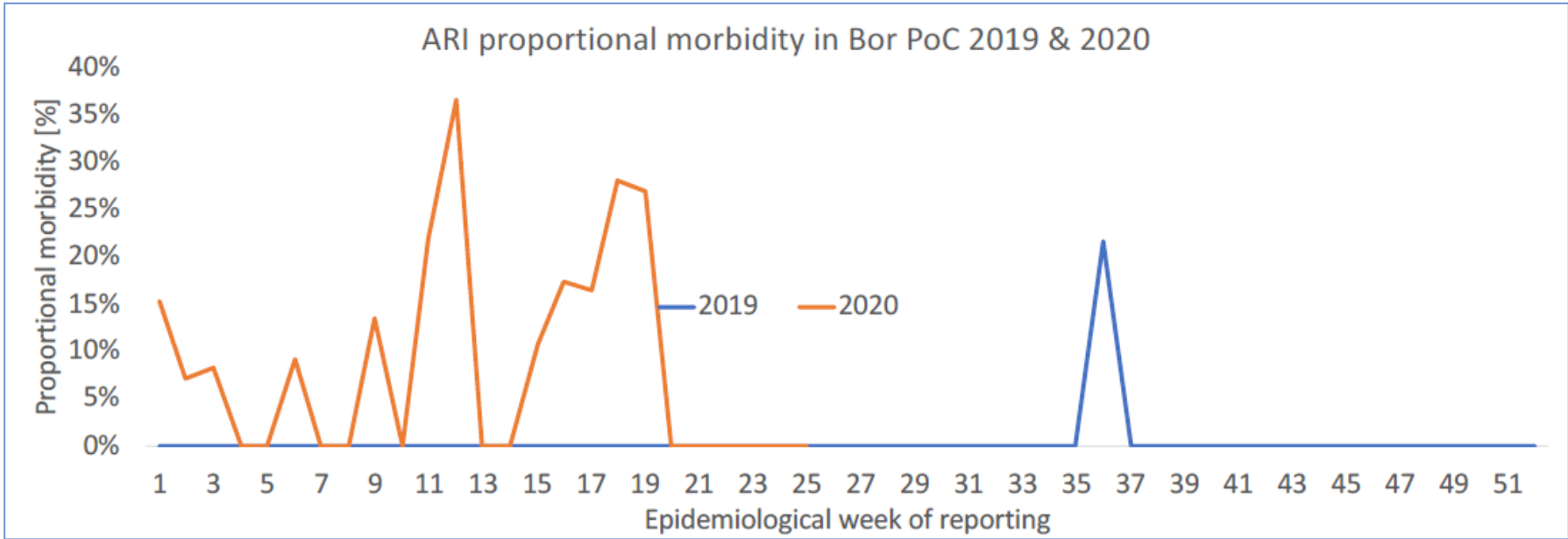
- Malaria started rising earlier (wk23, 2020) when compared to 2019
- In wk 25, 2020 malaria accounted for 25% of OPD consultations when compared to 7% in wk 25, 2019 & 21% in wk 24, 2020





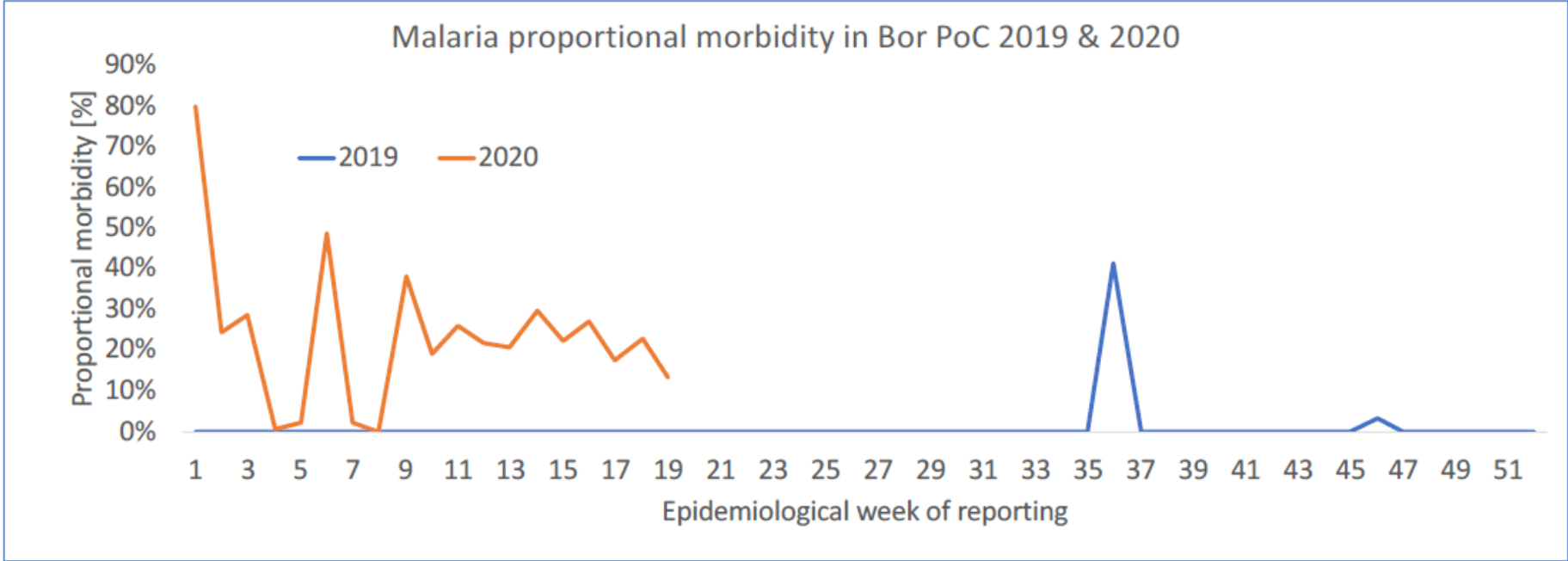
- ARI is top cause of morbidity followed by malaria & AWD
- ARI currently accounts for 27% of the total OPD consultations
- Malaria proportional morbidity is currently 13% when compared to 27% for ARI





ARI cases in Bor PoC constitute a significant proportion of OPD consultations since the beginning of 2020



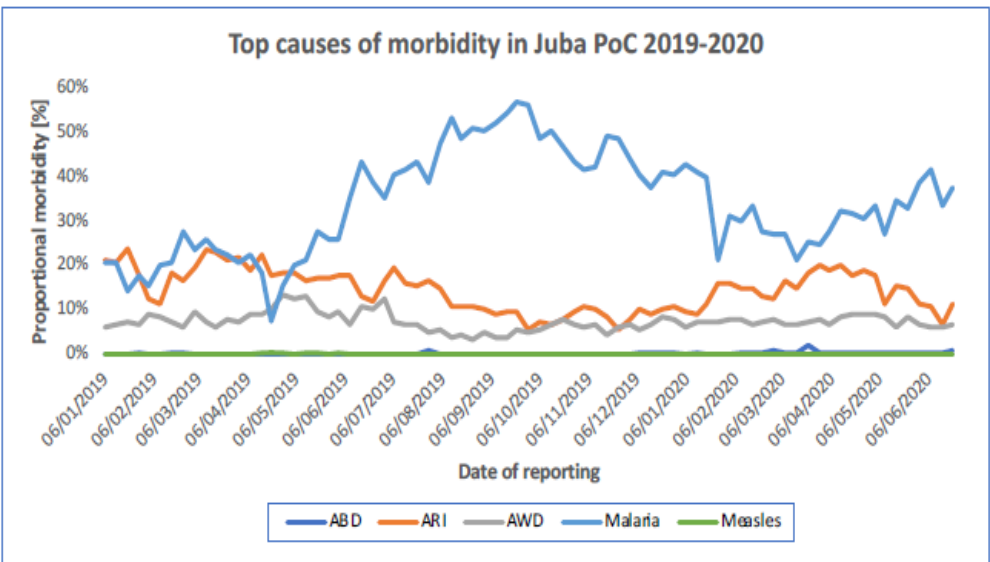


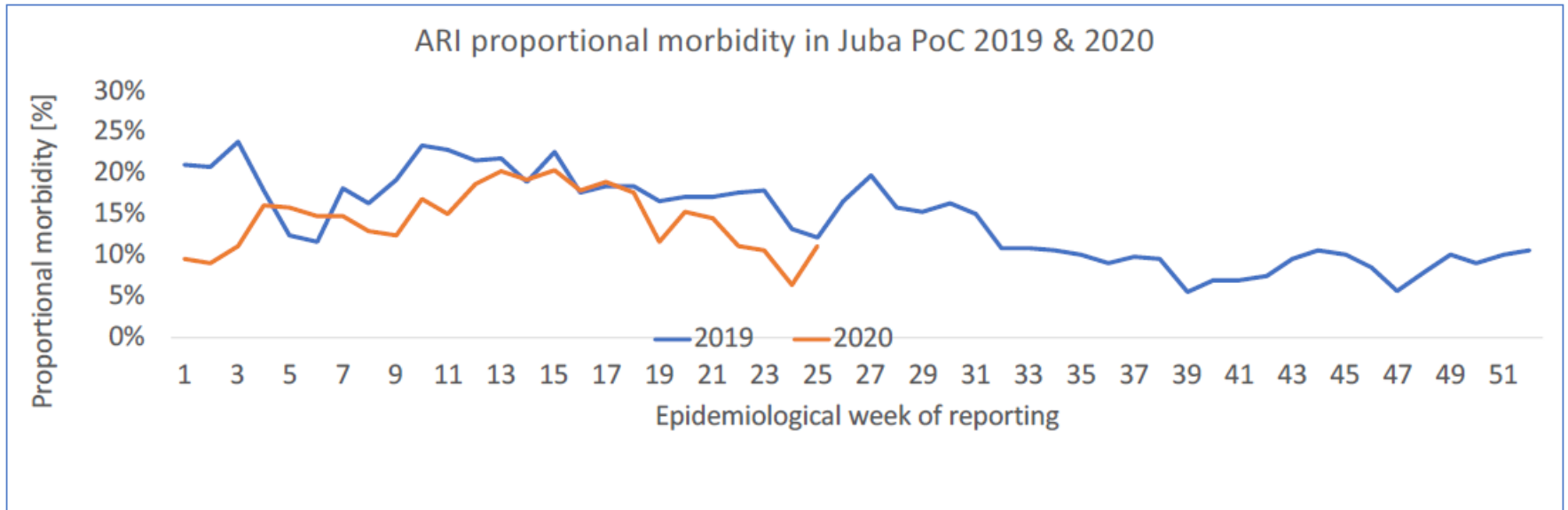
Malaria proportional morbidity declined from 80% in week 1 of 2020 to 13% in week 25 of 2020





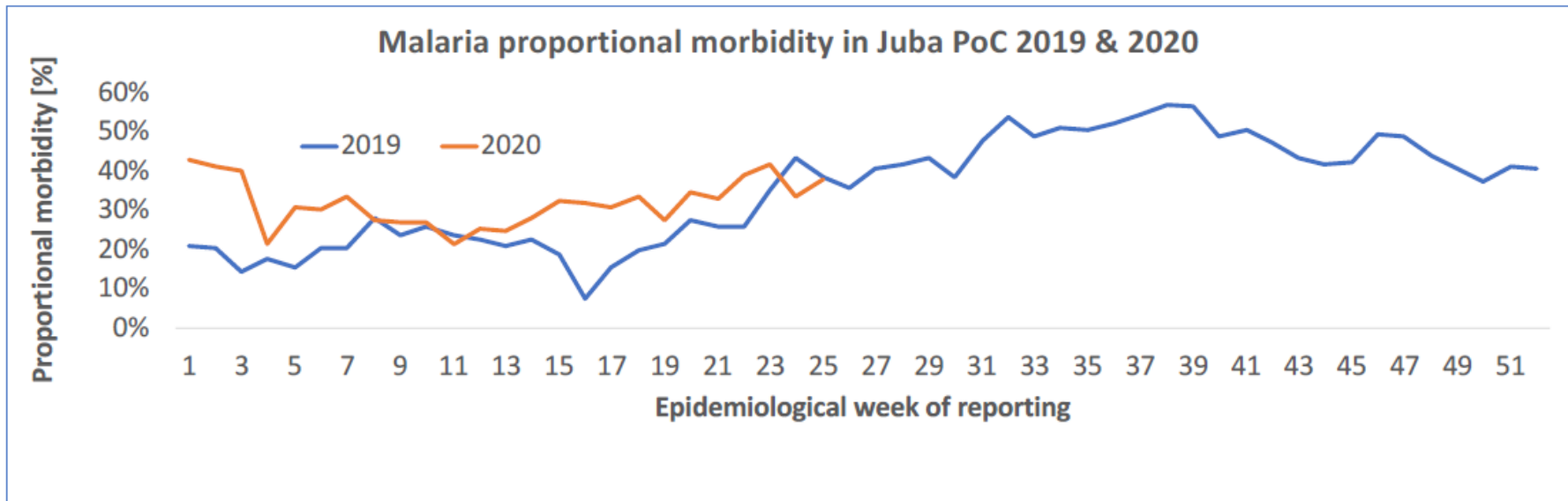
- Malaria is top cause of morbidity followed by ARI & AWD since wk 1, 2020
- Malaria currently accounts for 38% of the total OPD consultations
- ARI proportional morbidity is currently 11% when compared to 38% for malaria





ARI proportional morbidity in Juba PoC in 2020 comparable to the corresponding period of 2019



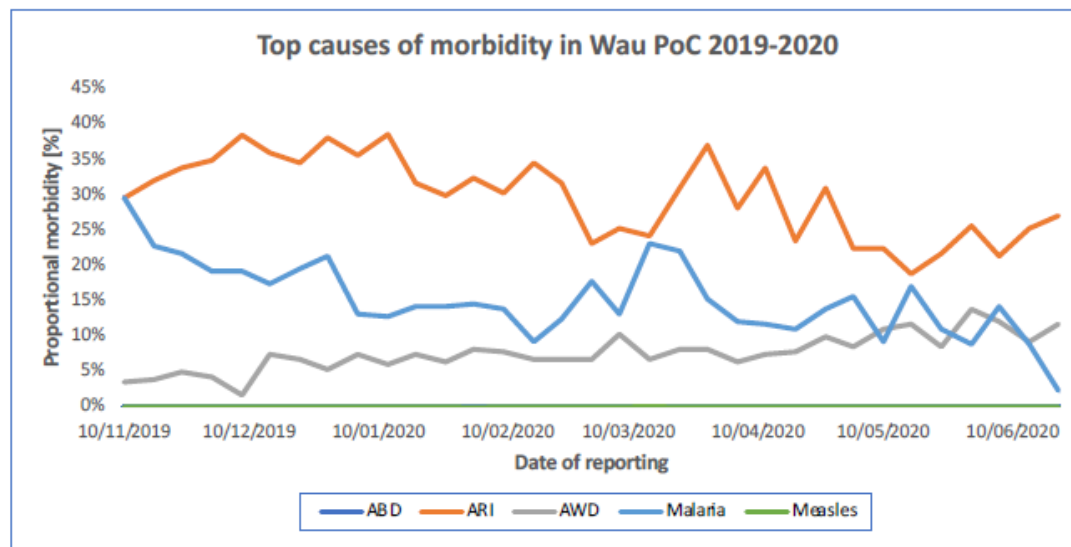


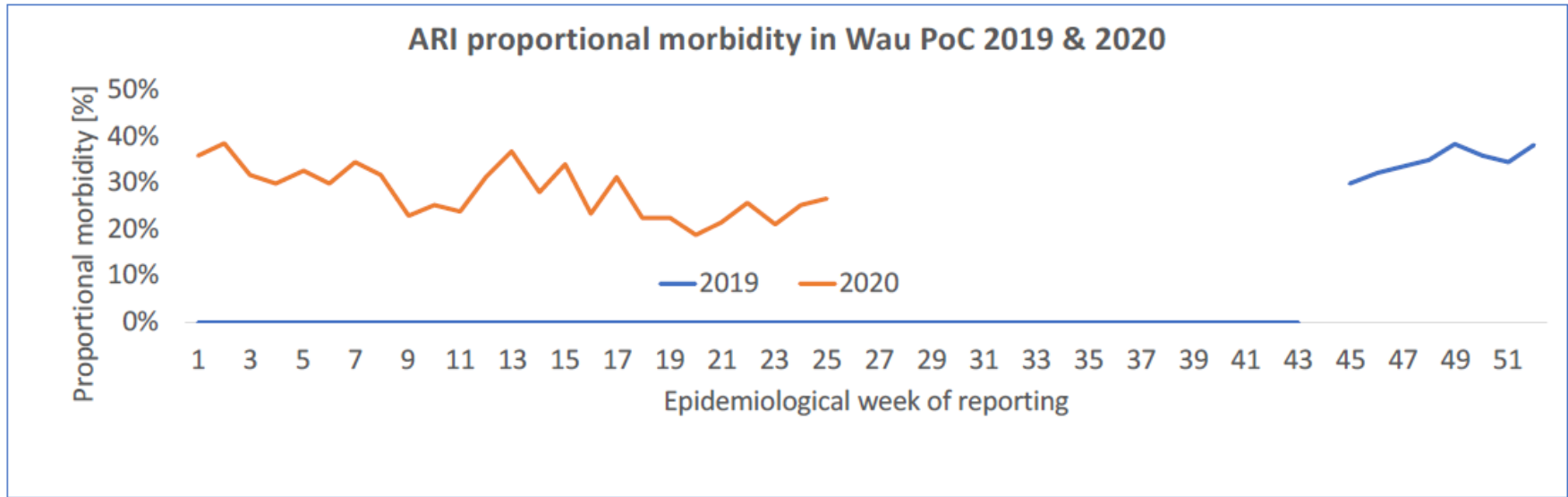
- Malaria cases in 2020 comparable to same period of 2019
- In wk 25, 2020 malaria accounted for 38% of OPD consultations when compared to 39% in wk 25, 2019





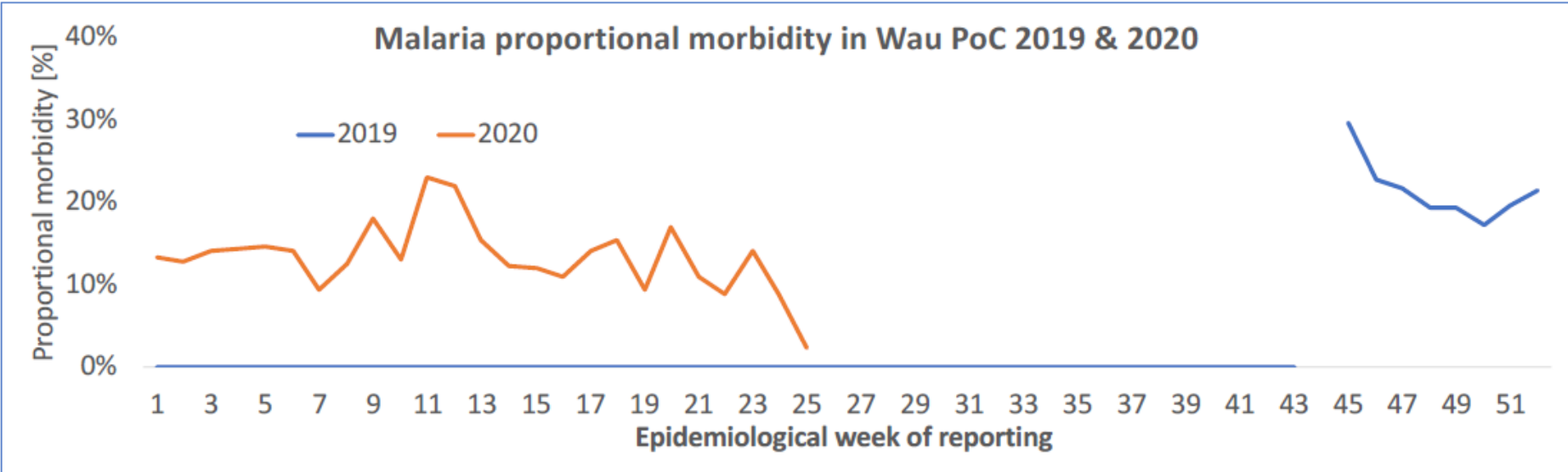
- ARI is top cause of morbidity followed by malaria & AWD since wk 1, 2020
- ARI currently accounts for 27% of the total OPD consultations
- Malaria proportional morbidity is currently 2% when compared to 27% for ARI





ARI proportional morbidity declined from 36% in week 1 of 2020 to 27% in week 25 of 2020





Malaria cases in 2020 are stable with proportional morbidity of 13% in week 1 of 2020 and 2% in week 25 of 2020





Mortality trends in Bentiu PoC 2019-2020

Number of ARI deaths Bentiu PoC, weeks 1-25, 2019 & 2020

Year	<5yrs	≥5yrs	Total deaths
2019	14	13	27
2020	18	39	57
Total deaths	32	52	84

ARI Proportional mortality, Bentiu, weeks 1-25, 2019 & 2020

	≤5yrs	>5yrs	All ages
2019	21%	8%	12%
2020	18%	20%	20%

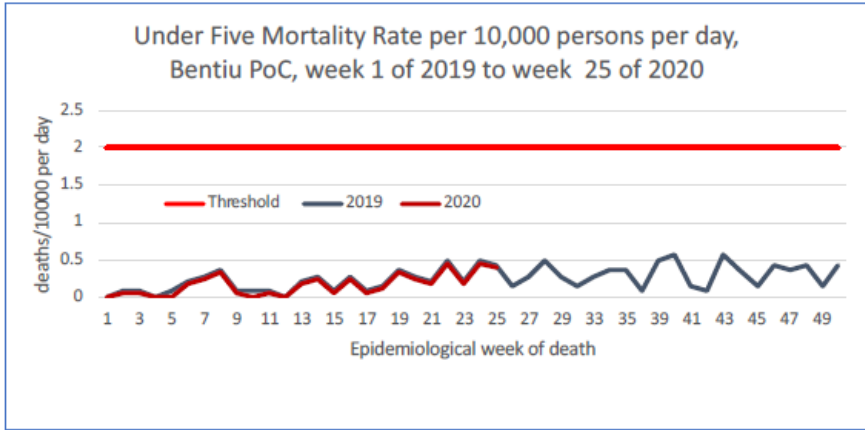
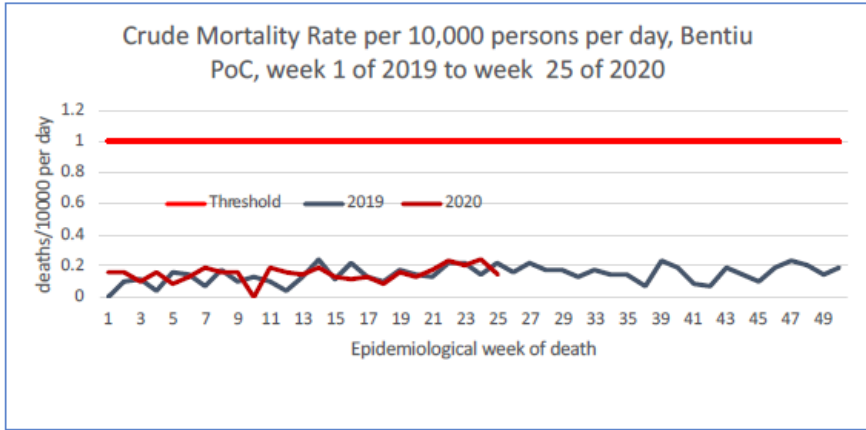
Higher number of deaths reported in 2020 when compared to 2019

- Proportional mortality rate is lower in 2020 than in 2019 in children <5yrs
- In ≥5yrs; proportional mortality rate is higher in 2020 when compared to 2019





Mortality trends in Bentiu PoC 2019-2020



The overall risk of death (Crude Mortality Rate - CMR) during 2020 is comparable to 2019 & below the emergency threshold of 1 death per 10,000 per day

The risk of death in children <5yrs of age (U5MR) in 2020 is comparable to 2019 & below the emergency threshold of 2 death per 10,000 per day.





- ARI a significant cause of morbidity in Bentiu; Wau; & Bor
- Malaria a significant cause of morbidity in all PoCs with Bentiu PoC reporting early season rise in cases since week 23
- Mortality (CMR & U5MR) in Bentiu PoC remain below the emergency thresholds.
- ARI deaths in Bentiu PoC in persons ≥ 5 yrs higher in 2020 when compared to 2019 (two of the deaths confirmed to be due to COVID-19)
- Strengthen surveillance for COVID-19 and other IDSR priority diseases in the PoCs.
- Strengthen implementation and adherence to public health social measures for COVID-19 prevention in the PoCs.
- Strengthen malaria prevention & control including improved access to diagnostics; medicines; vector control (LLINs and larviciding); & BCC for malaria prevention



Overall Conclusions and Recommendations



Conclusion

- The overall IDSR and EWARN reporting performance in week 24, is above the target of 80%. 9 out of 10 states were above 80%
- 1813 COVID-19 cases confirmed and 31 deaths CFR 1.7%. A total of 4050 contacts identified, quarantined and under follow up.
- Cumulative total of COVID-19 alerts is 558, of these, 451 (81%) have been verified and samples were collected
- With five outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- There are ongoing measles outbreaks in Wau; Bentiu PoC and Aweil East.
- Given the COVID-19 pandemic, it is critical that measures are stepped up to contain its spread.



Recommendations

- All partners should support CHDs & HF in Upper Nile and other states to improve IDSR/EWARN reporting
- Measles SIAs, routine immunization, surveillance & case management recommended in response to cases in Wau; Aweil East; & Bentiu PoC.
- 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-weekly-disease-surveillance-bulletin-2020>



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

For more help and support, please contact:

Dr. Pinyi Nyimol Mawien
Director General Preventive Health Services
Ministry of Health
Republic of South Sudan
Telephone: +211916285676

Mr. Mathew Tut M. Kol
Director, Emergency Preparedness and Response
Ministry of Health, RSS
Tell: +211916010382, +211922202028
Emails: tut1988@yahoo.com, greensouth2020@gmail.com
Skype: mathew19885

IDSR Bulletin Editorial Team

1. Mr. Ajak Ater, MoH - Email: ajakater014@gmail.com
2. Ms. 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. Alice Igale Lado, WHO - Email: ladua@who.int
7. Dr. Joseph Wamala, WHO - Email: wamalaj@who.int
8. Dr. Argata Guracha Guyo, WHO - Email: guyo@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 and USAID 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>

