

# South Sudan

**Integrated Disease surveillance and response (IDSR)**

**Epidemiological Bulletin Week 36 of 2020 (August 31-  
September 06)**



World Health  
Organization  
South Sudan



- In week 36, 2020 IDSR reporting completeness was 88% and timeliness was 61% at health facility level. EWARN reporting completeness was 79% and timeliness was 57%
- Of the 103 alerts in week 36, 2020; 39% were verified 0% were risk assessed and 0% required a response. Malaria (26), AWD (25), ARI (14), measles (3) and bloody diarrhea (16) were the most frequent alerts in week 36, 2020
- Malaria remains the top cause of morbidity and accounted for 98,784 cases (62.7% of OPD cases)
- Confirmed measles outbreak in Pibor county; all 6 samples sent to Juba tested measles IgM positive.
- A total of 1094 COVID-19 alerts have been investigated with 915 (83.6%) being verified. Total of 2532 COVID-19 confirmed cases and 47 deaths, CFR of 1.8%

# 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 36 of 2020



Completeness States Ranking	States	Supporting Partners	Total No. of Functional Health Facilities in the State	No. of HF's Reported on Time	Timeliness Percentage	No. of HF's Reported regardless of Time	Completeness Percentage
1st	WES	AMREF, World Vision, CUAMM, CDTY, OPEN	213	56	26%	212	100%
2nd	Lakes	Doctors with Africa (CUAMM), LIVEWELL	113	89	79%	112	99%
3rd	CES	HLSS, SSUHA, Healthnet TPO, IHO, GOAL, TRI-SS, THESO	118	110	93%	114	97%
4th	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	119	101	85%	109	92%
5th	WBGZ	Cordaid, Healthnet TPO, CARE International, IOM	75	61	81%	69	92%
6th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	130	84	65%	112	86%
7th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID	119	68	57%	97	82%
8th	EES	Cordaid, HLSS, CCM	142	76	54%	112	79%
9th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS	88	54	61%	63	72%
10th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	102	48	47%	70	69%
	South Sudan		1219	747	61%	1070	88%

## 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 61% and completeness was 88%. 7 states were above the target of 80% with highest reporting rate in WES with completeness of 100%.

# IDSR timeliness & completeness performance at county level for week 36 of 2020 (1)



STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HF's Reported on Time	Timeliness Percentage	No. of HF's Reported regardless of time	Completeness Percentage
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	7	100%	7	100%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	24	100%	24	100%
Lakes	Awerial	Doctors with Africa (CUAMM)	7	7	100%	7	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%
CES	Terekeka	HealthNetTPO	20	20	100%	20	100%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	16	15	94%	16	100%
Lakes	Wulu	Doctors with Africa (CUAMM)	14	13	93%	14	100%
WBGZ	Wau	Cordaid	28	25	89%	28	100%
CES	Yei	SSUHA	17	15	88%	17	100%
WBGZ	Jur River	Cordaid	35	30	86%	35	100%
Lakes	Cueibet	Doctors with Africa (CUAMM)	15	11	73%	15	100%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	6	55%	11	100%
Lakes	Yirol West	Doctors with Africa (CUAMM)	12	2	17%	12	100%
CES	Juba	HLSS	46	45	98%	45	98%
NBGZ	Aweil North	HealthNetTPO,IHO	33	22	67%	32	97%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	19	83%	22	96%
NBGZ	Aweil East	IRC,TADO	36	27	75%	32	89%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	13	87%	13	87%
CES	Morobo	SSUHA,THESO	6	5	83%	5	83%
CES	Lainya	SSUHA	14	10	71%	11	79%
NBGZ	Aweil West	HealthNetTPO	37	14	38%	26	70%
WBGZ	Raja	HealthNetTPO	12	6	50%	6	50%

STATE	COUNTY	SUPPORTING PARTNER	Total No. of Functional Health Facilities in the County	No. of HF's Reported on Time	Timeliness Percentage	No. of HF's Reported regardless of time	Completeness Percentage
Unity	Abiemnhom	Cordaid	4	4	100%	4	100%
Unity	Panyijar	IRC	15	15	100%	15	100%
WES	Mundri East	CUAMM	19	19	100%	19	100%
WES	Ibba	AMREF	11	10	91%	11	100%
Unity	Mayom	CASS	9	7	78%	9	100%
WES	Ezo	World Vision International	27	8	30%	27	100%
WES	Mundri West	CUAMM	21	5	24%	21	100%
WES	Tambura	World Vision International	26	2	8%	26	100%
WES	Nzara	World Vision International	20	0	0%	20	100%
WES	Nagero	World Vision International	10	0	0%	10	100%
WES	Maridi	AMREF	26	2	8%	26	100%
WES	Mvolo	CUAMM	11	1	9%	11	100%
WES	Yambio	World Vision International	42	9	21%	41	98%
Unity	Rubkona	Cordaid,IRC,IOM,MSF	14	11	79%	12	86%
Unity	Pariang	CARE International	11	4	36%	9	82%
Unity	Koch	CRADA,IRC.	4	3	75%	3	75%
Unity	Leer	UNIDOR	11	7	64%	8	73%
Unity	Mayendit	CASS	12	3	25%	3	25%
Unity	Guit	CHADO	7	0	0%	0	0%

# IDSR timeliness & completeness performance at county level for week 36 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	Pibor	LIVEWELL, CRADA	2	1	50%	2	100%
Jonglei	Pochalla	LIVEWELL	7	7	100%	7	100%
Jonglei	Duk	MDM + JDF	11	10	91%	11	100%
EES	Ikotos	HLSS	27	21	78%	25	93%
Jonglei	Bor	MDM + JDF	24	21	88%	22	92%
EES	Magwi	HLSS	21	18	86%	18	86%
EES	Torit	Cordaid	20	5	25%	17	85%
Jonglei	Ayod	CMD,EDA	15	1	7%	12	80%
EES	Budi	Cordaid	21	11	52%	16	76%
EES	Lopa Lafon	HLSS	18	4	22%	13	72%
EES	Kapoeta South	CCM	10	4	40%	7	70%
Jonglei	Akobo	NILE HOPE	3	2	67%	2	67%
EES	Kapoeta North	CCM	15	9	60%	10	67%
EES	Kapoeta East	CCM	10	4	40%	6	60%
Jonglei	Fangak	CMD,HFO	17	3	18%	10	59%
Jonglei	Twic East	MDM + JDF	8	3	38%	3	38%
Jonglei	Nyirrol	CMA,Malaria Consortium	8	0	0%	1	13%
Jonglei	Canal Pigi	IMC	5	0	0%	0	0%
Jonglei	Uror	Nile Hope,Malaria Consortium	2	0	0%	0	0%

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	Tonj North	CCM	14	14	100%	14	100%
Warrap	Tonj East	CCM	12	12	100%	12	100%
Warrap	Tonj South	CCM	12	12	100%	12	100%
Upper Nile	Manyo	CORDAID	10	10	100%	10	100%
Upper Nile	Maiwut	RI	5	5	100%	5	100%
Upper Nile	Panyikang	IMC	4	4	100%	4	100%
Upper Nile	Longechuk	RI	9	9	100%	9	100%
Warrap	Gogrial East	GOAL	15	10	67%	15	100%
Upper Nile	Melut	WVI + RI	8	0	0%	8	100%
Upper Nile	Renk	WVI + RI	13	2	15%	12	92%
Warrap	Twic	GOAL	25	22	88%	22	88%
Upper Nile	Maban	WVI + RI	17	8	47%	15	88%
Upper Nile	Luakpiny Nasir	UNKEA,RI	16	13	81%	13	81%
Warrap	Gogrial West	GOAL	31	24	77%	25	81%
Upper Nile	Akoka	IMC	5	4	80%	4	80%
Warrap	Abyei	AAA,Save the Children,MSF	10	6	60%	8	80%
Upper Nile	Fashoda	CORDAID	13	8	62%	8	62%
Upper Nile	Makal	IMC	7	1	14%	3	43%
Upper Nile	Ulang	UNKEA,RI	15	4	27%	6	40%
Upper Nile	Baliet	IMC	4	0	0%	0	0%





# Surveillance: EWARS performance indicator by partner for week 36 of 2020

Partner	HF's	Reporting		Performance	
PARTER	# OF SITES	# of reports received on Time	No. of HF's Reported regardless of time	Timeliness	Completeness
IRC	1	1	1	100%	100%
TRI-SS	2	2	2	100%	100%
Medair	2	2	2	100%	100%
CMD	1	1	1	100%	100%
HAA	2	2	2	100%	100%
RHS	1	1	1	100%	100%
IMC	5	5	5	100%	100%
Medicaire	2	2	2	100%	100%
MDM	1	1	1	100%	100%
GOAL	2	0	2	0%	100%
IOM	12	9	11	75%	92%
IMA	9	5	8	56%	89%
MSF-E	6	0	4	0%	67%
MSF-H	5	1	3	20%	60%
UNIDOR	2	1	1	50%	50%
HFO	1	0	0	0%	0%
World Relief	2	0	0	0%	0%
SMC	2	0	0	0%	0%
TOTAL	58	33	46	57%	79%

**Completeness was 79% and timeliness was 57% for weekly reporting in week 36, 2020 for partner-supported clinics serving IDP sites.**



# EVENT-BASED SURVEILLANCE



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





Alert by disease and hubs in week 36 of 2020 [ a total of 103 events specific alerts generated by state

State	Acute jaundice syndrome	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	AFP	Bloody Diarrhoea	Malaria (Confirmed)	Measles	Cholera	Guinea Worm	EBS	PoE COVID EVD	Covid-19	Total alerts
CES		1	4	2	1	1		1	2		1	1	14
EES			3		3	1					1	1	9
Jonglei		3	2		2	2	2					1	12
NBGZ			1										1
Unity	1	1			1	3				1		1	8
Upper Nile		6	4	1	4	5						1	21
Warrap	1		2		3	3	1					1	11
WBGZ		1	6		2	4					1		14
WES		2	3			7						1	13
<b>Total alerts</b>	<b>2</b>	<b>14</b>	<b>25</b>	<b>3</b>	<b>16</b>	<b>26</b>	<b>3</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>7</b>	<b>103</b>

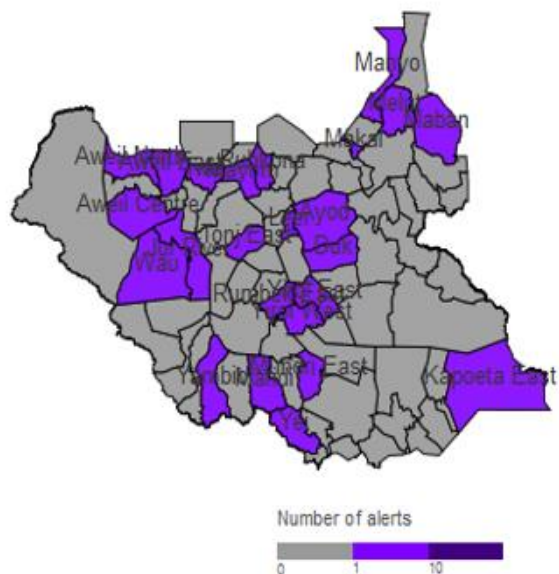
**During this week:**

- 2 AJS alert: Undergoing investigation by the team
- 14 ARI alert: 12 are undergoing investigation and 2 under monitoring
- 25 AWD alert: 19 are undergoing verification and 4 under monitoring
- 16 ABD alert: all under going investigation
- 26 Malaria alerts: 22 are undergoing verification and 4 are under monitoring
- 3 Measles alert: 2 undergoing investigation and 1 under monitoring
- 3 PoE COVID EVD alert: 2 are undergoing verification and 1 is under monitoring
- 3 AFP alert: all under going investigation
- 7 Covid-19 alert: All are been investigated and sample collected
- 1 Cholera Alert: undergoing investigation
- 1 EBS alert: undergoing investigation
- 2 Guinea Worm alerts : under investigation by the G.W program.

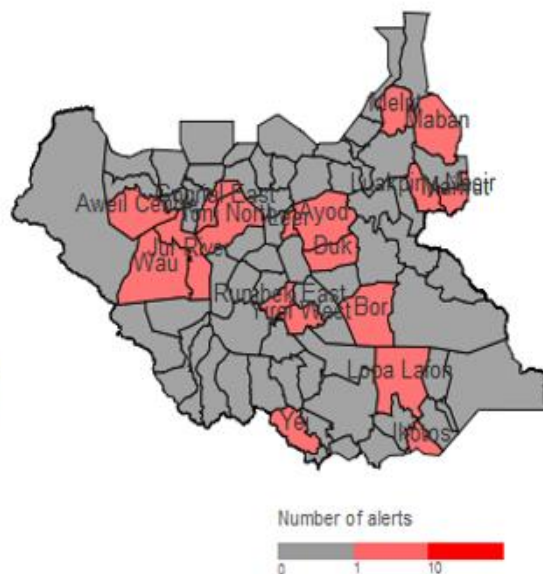
# Alert: Map of key disease alerts by county of week 36 of 2020



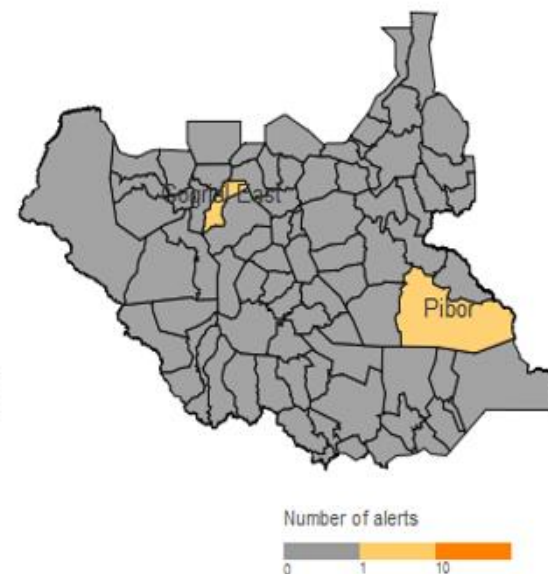
Map 2a | Malaria (W36 2020)



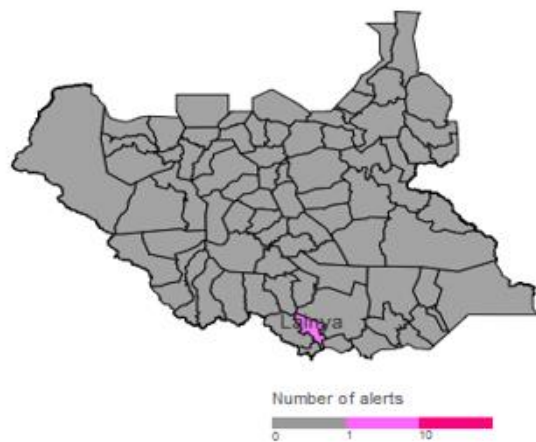
Map 2b | Bloody diarrhoea (W36 2020)



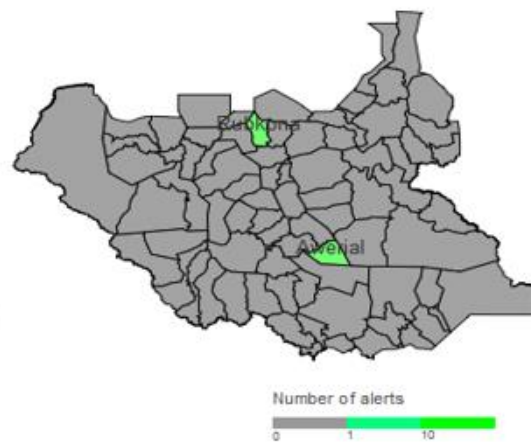
Map 2c | Measles (W36 2020)



Map 2e | Guinea Worm (W36 2020)



Map 2f | Event-based surveillance (W36 2020)



W36	Cumulative (2020)	
0	11	Low risk
4	4	Medium risk
0	27	High risk
0	54	Very high risk

39%	77%	% verified
0%	0%	% auto-discarded
0%	1%	% risk assessed
0%	1%	% requiring a response

# SUSPECTED OUTBREAKS



Major suspected outbreaks in South Sudan in  
2020



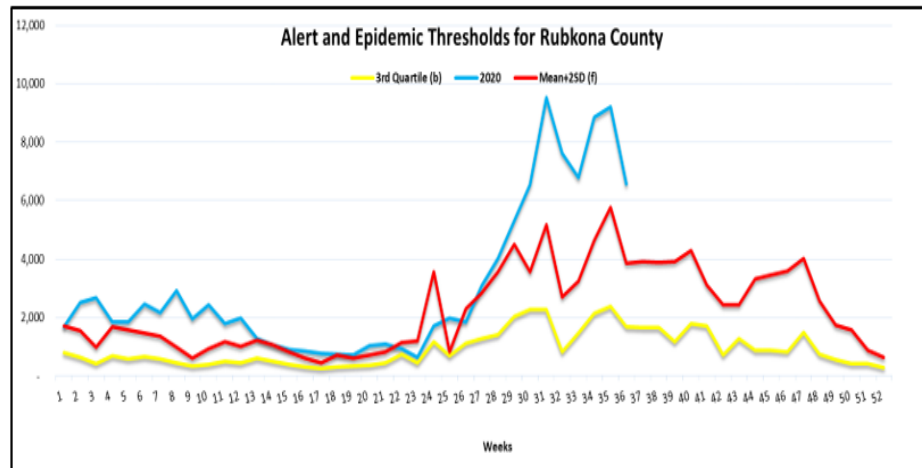


Malaria was the leading cause of morbidity and mortality, accounting for **62.7%** of all morbidities and **27.6%** of all mortalities this week.

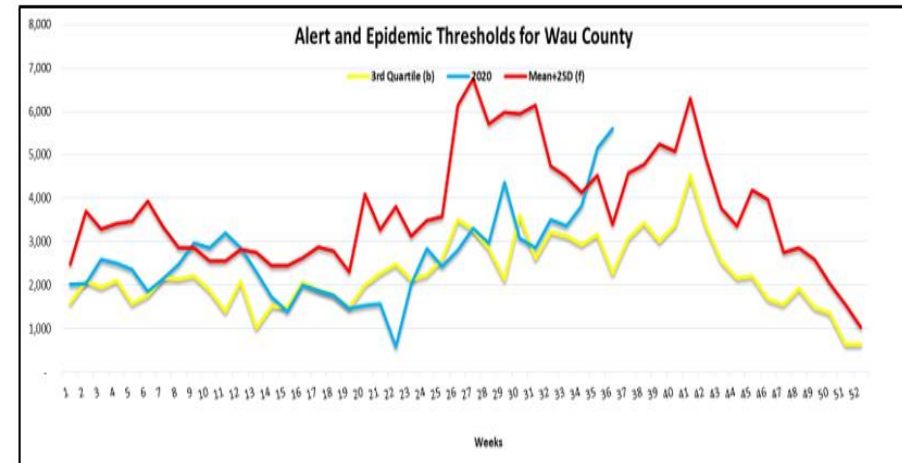
There were **3 Counties** with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following: Bentiu hub ( Rubkona); Bentiu hub (Rubkona); Wau hub (Wau); kwajok Hub (Tonj East)

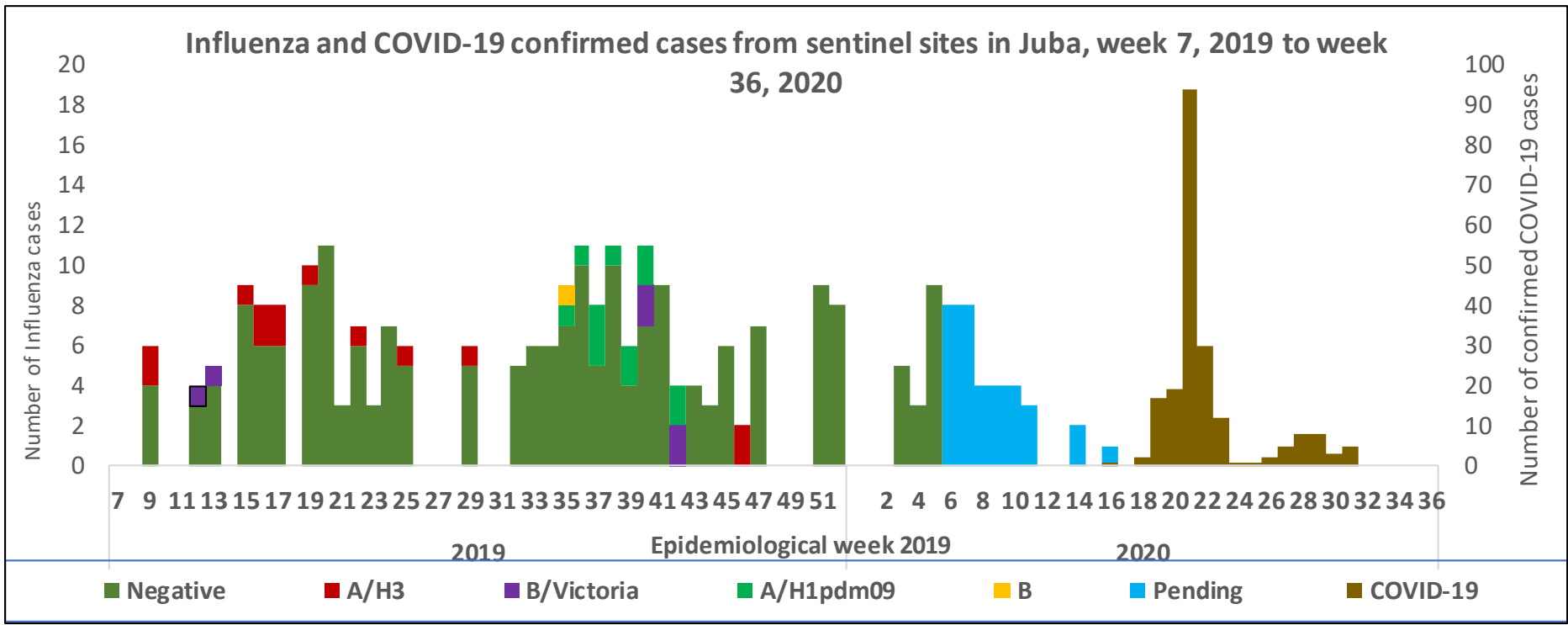
**In the PoC sites**; malaria is the top cause of morbidity in Bentiu (53%); Juba (44%), Bor (58%) and Wau (38%) PoCs, in Malakal PoC malaria accounts for (7%) of OPD consultations, respectively.

Rubkona.



Wau.





- 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.
- 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 .
- There are currently 20 Covid-19 designated sentinel surveillance sites in Juba that are collecting epidemiological data and samples from ILI/SARI cases. A total of 3407 samples have been collected in 2020 with 206 (6.0%) being positive for COVID-19 in Juba. These sentinel samples have not been tested for influenza in 2020

# ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

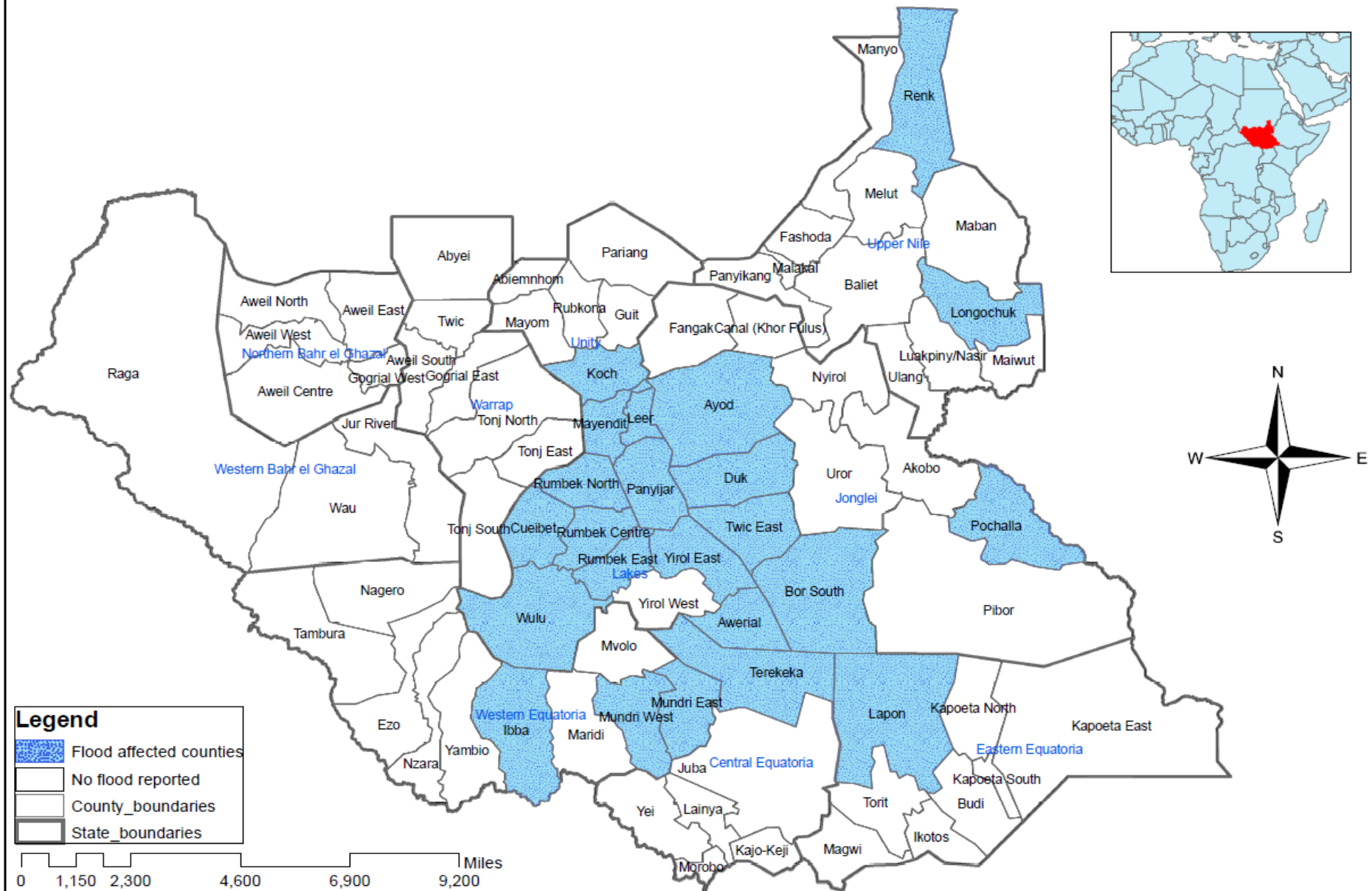


Brief epidemiological description and public health response for active outbreaks and public health events





Map showing the flood affected counties in south sudan July - August, 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.





## Flooding, South Sudan, week 36, 2020

### Description

Monitoring of flood forecast continues across the country, in the next two weeks it is forecast that the southern part of the country (the Eqatorias and Jonglei) will experience above-average rainfall. The number of affected population still over 600,000 individuals. New flooding reported from Pibor in Jonglei, Panriang and Mayom (Mankien) in Unity state, Aburoc nd Maiwut in Upper Nile state. The state partners are mobilizing assessment and response capacity at the sub-national level.

### Public health response

- The WHO eMMT is currently responding in Pibor through provision of mobile health and nutrition services to the affected population.
- Floods multi-cluster response and assessments are ongoing in the other affected Counties.
- Clusters and core pipeline managers planning to review core pipeline status to establish the gap that can be supported through funding sources like CERF.
- The humanitarian community might consider requesting for support from CERF or in-country pooled fund for floods response
- The WHO Country Office has placed a request for CFE to support flood response.

# Update on Measles lab results release in Sept. 2020

S/N	County	Total Number of Samples tested	Measles IgM Positive	Rubella IgM Positive
1	Pibor	6	6	0
2	Nzara	10	0	0
3	Ibba	1	0	0
4	Tambura	1	0	1
4	Nagero	1	0	1
5	Ezo	1	0	0
6	Juba	1	0	0
	Total	21	6	2

- In September the lab has received additional 21 samples for Measles
- 6 of the 21 samples are from Pibor and all tested positive for measles IgM



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
<b>Ongoing epidemics</b>								
Hepatitis E	Bentiu PoC	03/01/2018	6	375 (0.016)	Yes	No	Yes	Yes
Measles	Bentiu PoC	24/04/2019	NR	482 (0.006)	Yes	Yes	Yes	N/A
Measles	Pibor	27/1/2020	5	86(0.058)	Yes	Yes	Yes	N/A

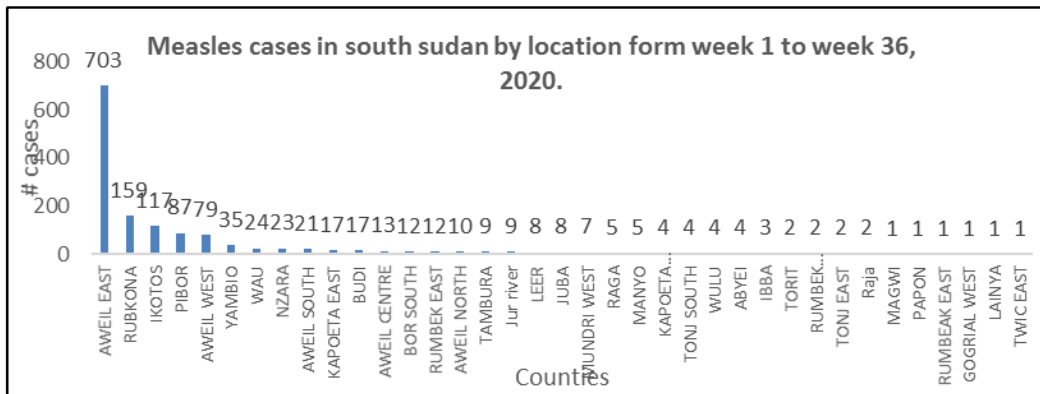
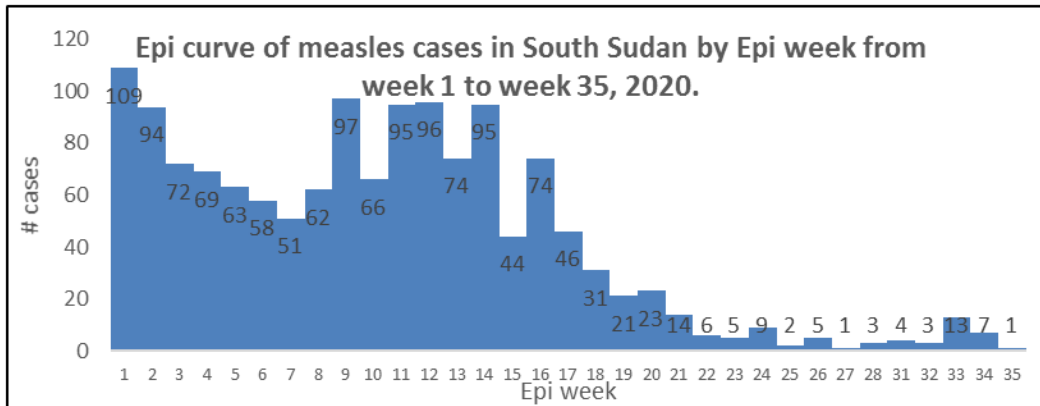




- Measles outbreaks confirmed in 2020
  - 7 counties – Tonj East, Magwi, Bor, Kapoeta East, Tonj South, Wau and Pibor
  - Locations with ongoing measles transmission
    - Bentiu PoC
  
  - **New confirmed measles outbreak in Pibor ( 6 samples were positive on IgM)**



## Measles Cases in South Sudan wk 1- 35, 2020



Age Group	Cases	Percentage	% Cum
0 - 4 Years	845	60%	60%
10 - 14 Years	158	11%	71%
15+ Years	171	12%	83%
5 - 9 Years	239	17%	100%
<b>Grand Total</b>	<b>1413</b>	<b>100%</b>	



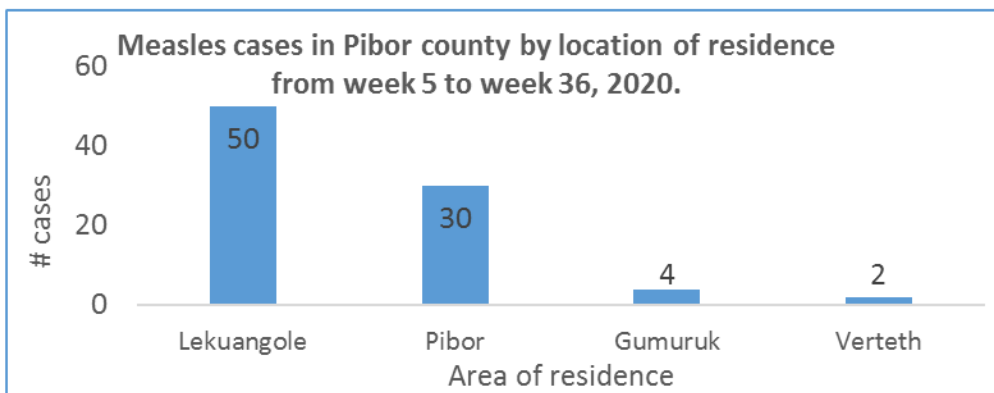
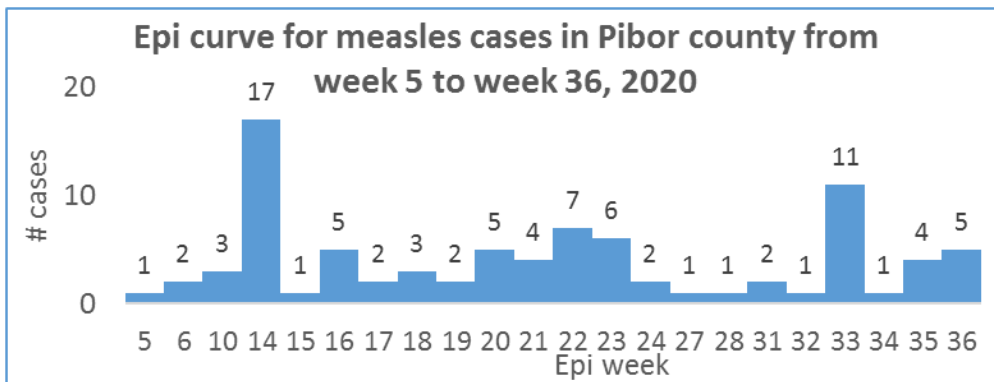
### Background and descriptive epidemiology

- Measles transmission has persisted in South Sudan despite of the routine and emergency vaccination campaign conducted
- Measles cases were reported from week 1, 2020, as of week 35 total of 1413 cases are reported from all over the country
- 60% of the cases are less than 5 years of age
- 48% are female and 52% male
- Most affected areas are Awiel East followed by Rubkona

### Response Actions:

- Partners to strengthen routine immunization and to continue to collect samples from suspect cases.
- Measles case management to continue

## Confirmed Measles Outbreak in Pibor



Age Group	Cases	Percentage	% Cum.
1 - 4 Years	66	77%	77%
5 - 9 Years	16	19%	95%
15+ Years	3	3%	99%
10 - 14 Years	1	1%	100%
<b>Grand Total</b>	<b>86</b>	<b>100%</b>	

### Background and descriptive epidemiology

- Measles transmission has persisted in Pibor county despite of the vaccination campaign conducted in February and March and October, 2019
- Suspected measles cases were reported from Pibor; five sample were send to Juba and tested measles IgM +e.
- 5 cases reported in week 36, makes a total of 86 since beginning of 2020
- 77% of the cases are less than 5 years of age
- 52% are female and 48% male
- Most affected areas are Lekuangle followed by Pibor town

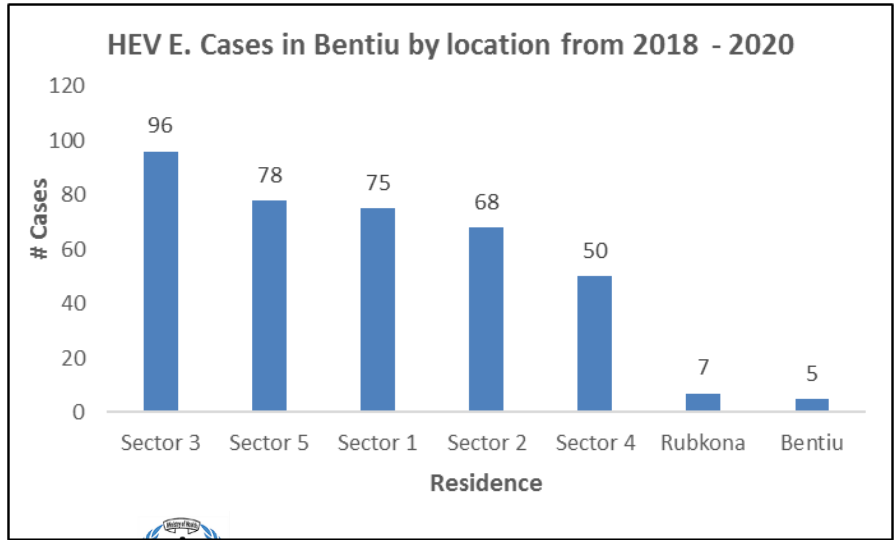
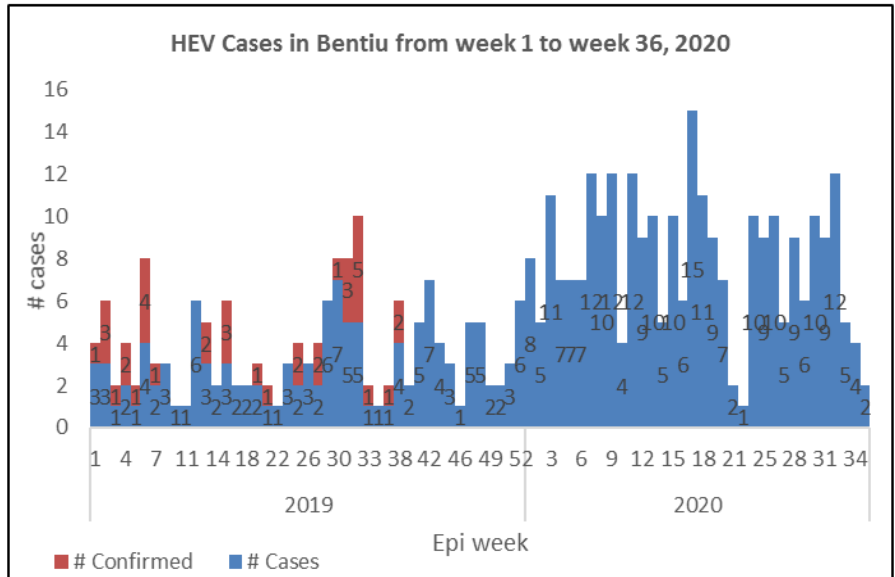
### Response Actions:

- Partners to strengthen routine immunization and 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 401 cases since beginning of 2019
- There were (2) new cases reported in week 35, 2020
- All the cases were managed as outpatient cases except for seven cases who were admitted
- 5 deaths reported in 2019 and 2020
- 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 35, 2020; there were 401 cases of HEV in Bentiu PoC including 4 deaths (CFR 0.01%)

Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	126	0	126	31%	0%	31%
10 - 14 Years	62	0	62	15%	0%	47%
15+ Years	97	3	100	25%	3%	72%
5 - 9 Years	111	2	113	28%	2%	100%
<b>Grand Total</b>	<b>396</b>	<b>5</b>	<b>401</b>	<b>100%</b>	<b>0.01</b>	



## 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
<b>Controlled epidemics</b>								
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
Measles	Aweil East	29/12/2019	NR	664 (0.127)	Yes		No	Yes



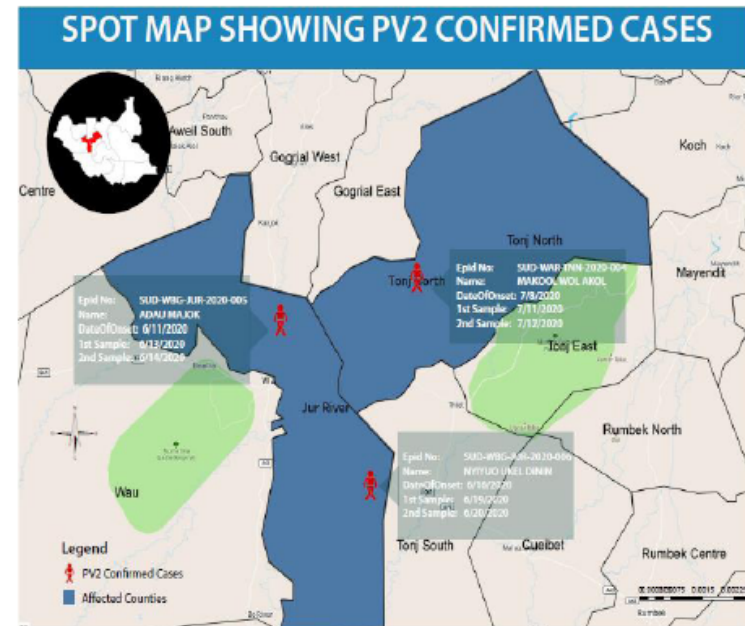
# Preliminary notification of polio virus type 2 in South Sudan

September, 2020

**Week 36**

# Preliminary notification PV2

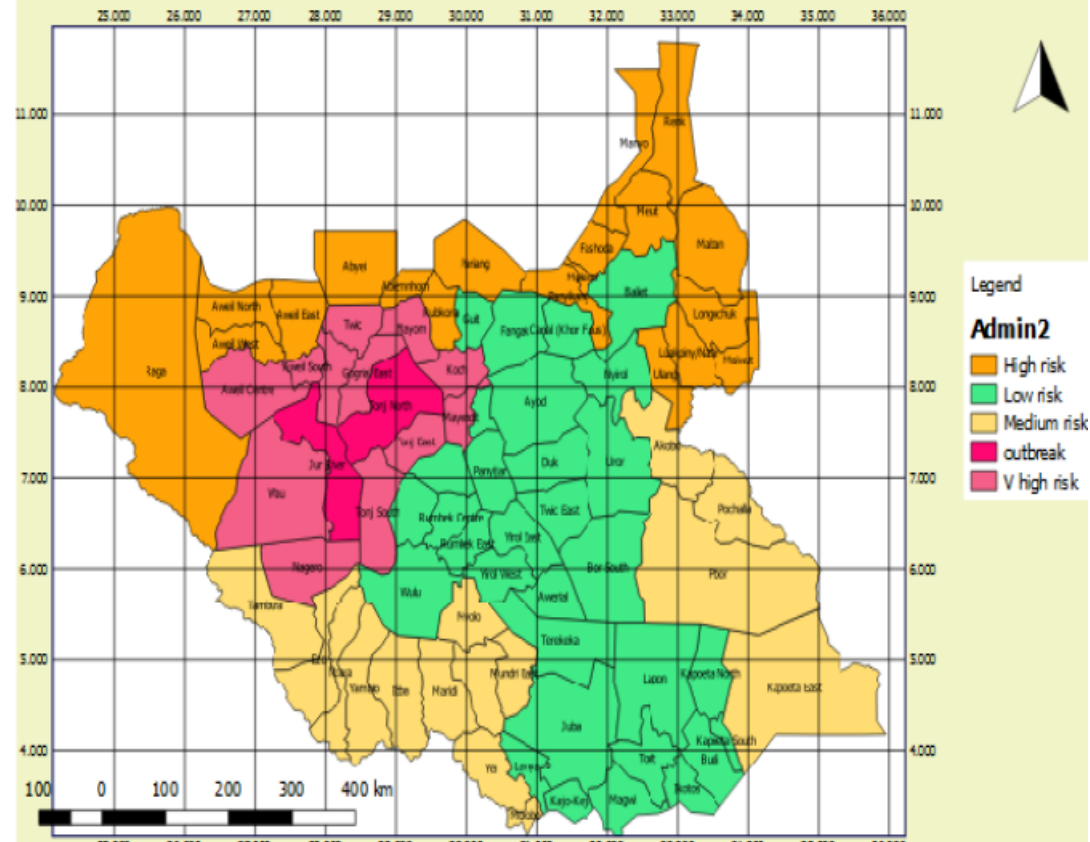
- 4th September 2020, the country received a notification on the isolation of Polio Virus Type 2(PV2) from 3 an AFP cases.
- Further analysis(sequencing) is on going to establish the type of the virus
- The two cases are from Western Bahr EL Ghazal state in Jur River county, while one case was reported from Warrap state in Tonji North county.
- The date onset for the first cases is on June-11-2020, while the last case was on July 11, 2020
- All are below two years,



# Proposed course of action

- **Enhanced surveillance:** Increase the frequency of active surveillance, and raise NP-AFP rate to 3/100000 <15 years
- Outbreak investigation is underway
- Alert letter sent to the field staff to activate the surveillance system
- Strengthen immunization to improve coverage particularly IPV
- **Immunization Response**
  - Conduct Rapid response campaign within 14 days from date of notification
  - Target outbreak affected counties including adjacent counties.
  - mOPV2 campaign targeted use in outbreak affected and bordering counties
- **2<sup>nd</sup> and 3<sup>rd</sup> SIAs**
  - 1<sup>st</sup> and 2<sup>nd</sup> rounds to target wider area and target population

## PV2 outbreak and high risk counties targeted for immunization response, South Sudan



# EBOLA VIRUS DISEASE[EVD] PREPAREDNESS IN SOUTH SUDAN



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



# EVD DRC Update 11<sup>nd</sup> September in Equateur Province

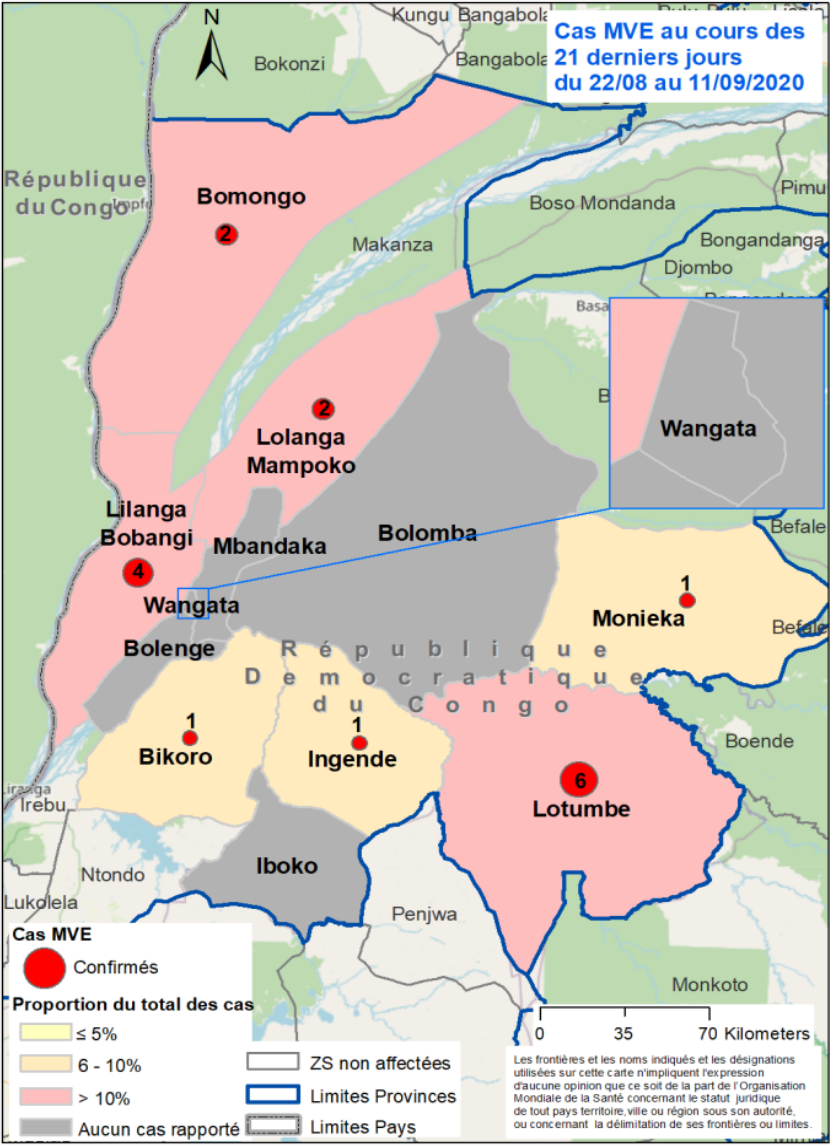
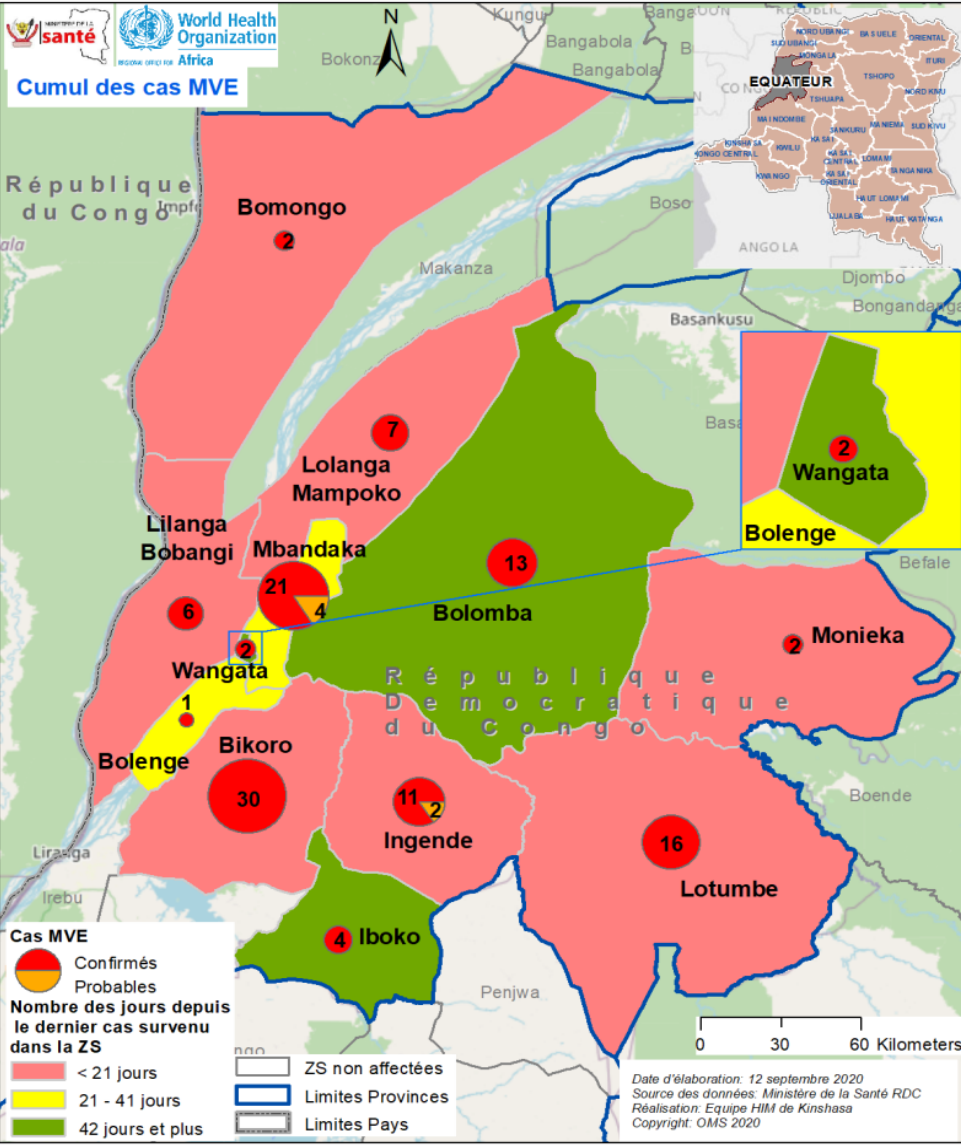
## Cumulative figures for the outbreak

- 121 cases (115 confirmed, 6 probable;)
- 48 deaths (39.7% CFR), 54 recoveries;
- 39 affected health areas, 12 health zones;
- 28,477 vaccinated, 7,173 high risk;
- 6 known confirmed cases are in the community (4 in Lotumbe, 1 in Ingende and 1 in Mbandaka).

## Highlights from the past 21 days:

- Repeated risk assessment conducted on 7<sup>th</sup> Sept. has increased regional level of risk from moderate to high;
- 17 confirmed cases were reported in 7 health areas across 7/12 affected health zones;
- 5 HZs have not reported a case in 21 days
- Over two thirds of cases confirmed have not been registered contacts; and almost 50% do not have an epi-link to date.

# Distribution of EVD cases, Equateur Province, as of Sept 11th, 2020 (n = 121)



# COVID-19 Updates



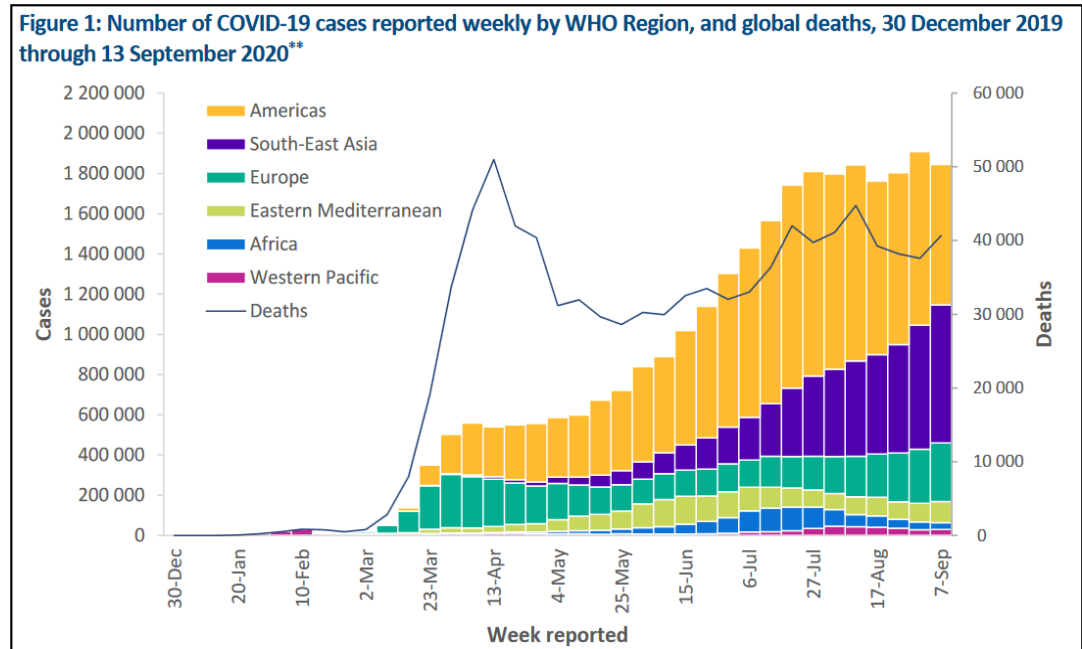


# COVID-19 Virus Situation Summary



Situation update as of 14<sup>th</sup> September 2020

- The COVID-19 pandemic initial cases were detected in Wuhan China
- Globally >25 million cases (> 800 000 deaths)
- Africa > 1 million cases (>21 722 deaths)



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

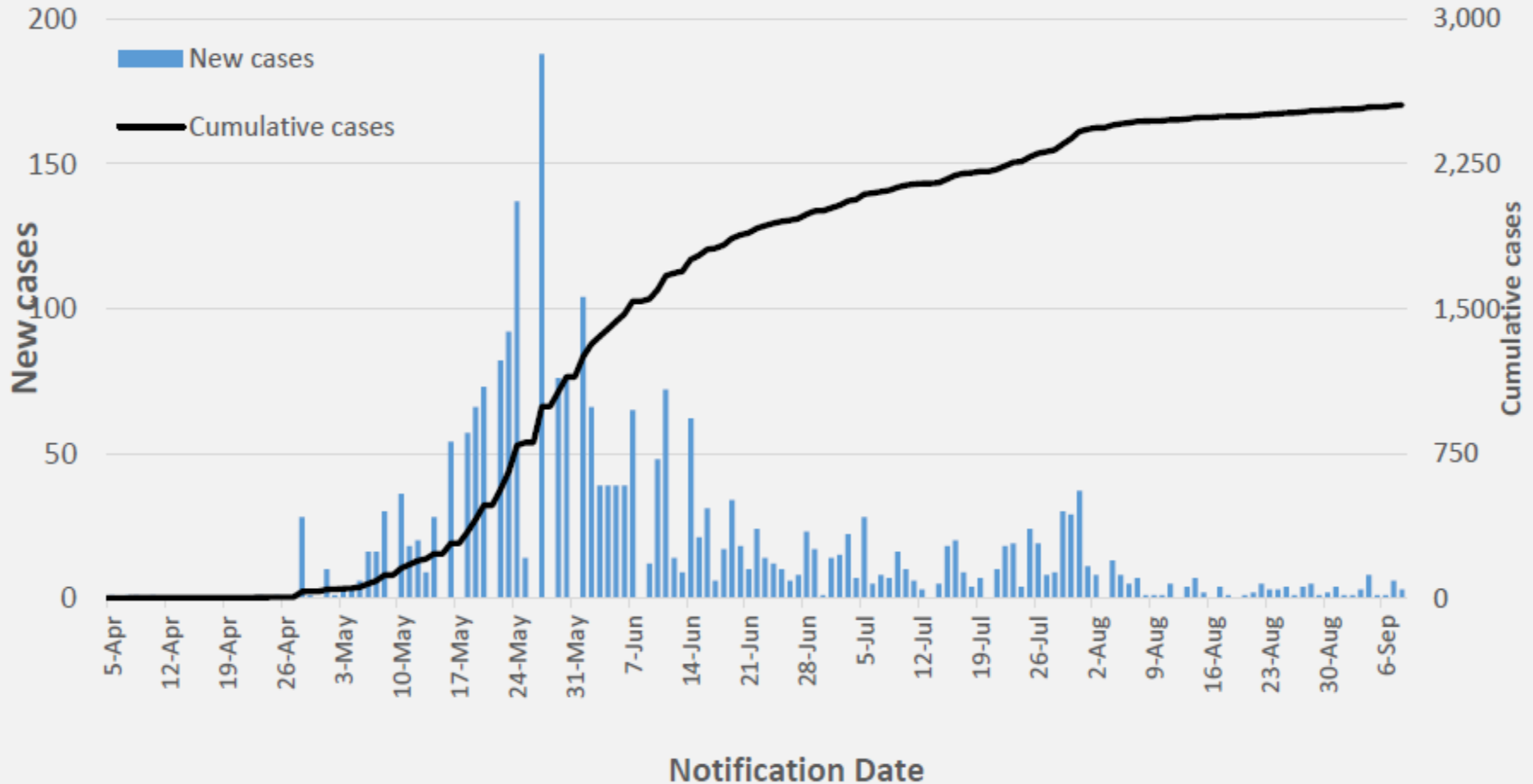


- 2,555 confirmed COVID-19 cases in South Sudan; 85% in Juba with 48 deaths and a case fatality rate (CFR) of 1.8%. Total 8,349 contacts identified, quarantined, & undergoing follow up
- Implementation of priorities; risk communication and community engagement; active case search and testing; quarantine for contacts; isolation of confirmed cases, infection prevention and control; and management of cases are currently underway
- The overall response currently led by the COVID-19 National level taskforce and the COVID-19 National Steering Committee





Figure 1. New and cumulative confirmed COVID-19 cases by notification date

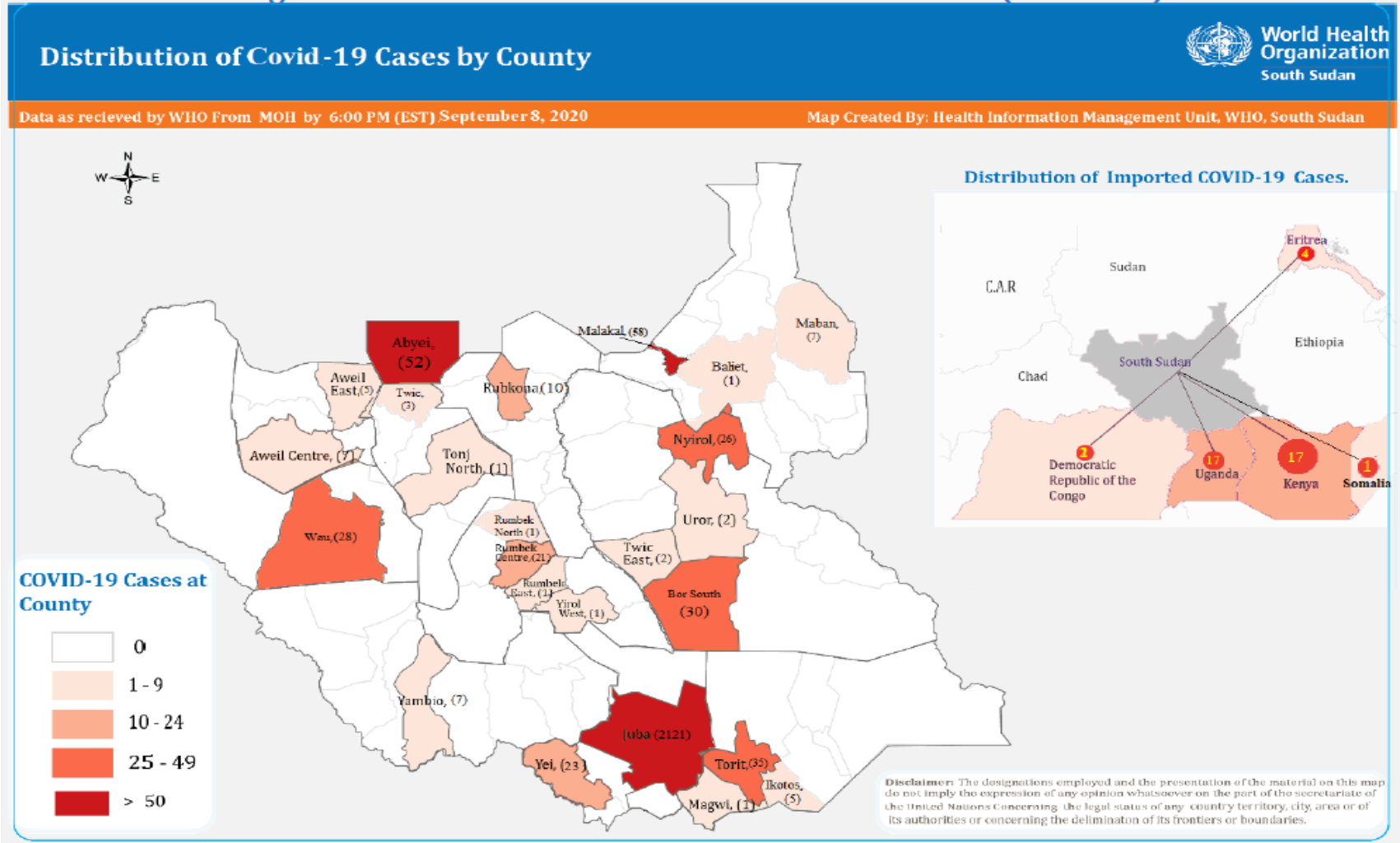


COVID-19 cases increasing exponentially in the past few weeks

# Distribution of COVID-19 cases in South Sudan



Figure 3. Distribution of confirmed COVID-19 cases (n=2 492\*)



*\*Geographical information is available for 2 492 cases.*

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

# Overall Conclusions and Recommendations



# Conclusion

- The overall IDSR and EWARNS reporting performance in week 36, is above the target of 80%. (9) states were above 80%
- 2,555 confirmed COVID-19 cases in South Sudan; 85% in Juba with 48 deaths (CFR of 1.8%). Total 8,349 contacts identified, quarantined, & undergoing follow up
- Cumulative total of COVID-19 alerts is 1414, of these, 962 (84.3%) have been verified and samples were collected
- With seven outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- There are ongoing measles outbreak in Bentiu PoC and Pibor County
- Given the COVID-19 pandemic, it is critical that measures are stepped up to contain its spread.



## Recommendations

- All partners should support CHDs & State Ministries of Health to undertake IDSR/EWARN reporting
- All health facilities should report, and conduct case-based investigation of suspect measles cases and routine measles immunization should be strengthened in all counties
- 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>

