

South Sudan

Integrated Disease surveillance and response (IDSR)

**Epidemiological Bulletin Week 49 of 2020 (November 30-
December 6)**



World Health
Organization
South Sudan



- In week 49, 2020 IDSR reporting completeness was 81% and timeliness was 69% at health facility level. EWARN reporting completeness was 79% and timeliness was 68%
- Of the 78 alerts in week 49, 2020; 73% were verified 3% were risk assessed and 0% required a response. Malaria (307), AWD (23), ARI (12), measles (1) and bloody diarrhea (5) were the most frequent alerts in week 49, 2020
- Malaria remains the top cause of morbidity and accounted for 55,265 cases (57.9% of OPD cases)
- A total of 1,563 COVID-19 alerts have been investigated with 1,374 (87.9%) being verified. Total of 3,181 COVID-19 confirmed cases and 62 deaths, CFR of 2.0%
- Other hazards include floods in over 43 counties; malaria in 5 counties; measles in Pibor, Ibba and Wau; HEV in Bentiu PoC; and suspected HEV in Abyei; RVF alert in Yirol

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 49 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	213	100%	213	100%
2nd	CES	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO	118	104	88%	110	93%
3rd	WBGZ	Cordaid, Healthnet TPO, CARE International,IOM	75	34	45%	68	91%
4th	NBGZ	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	130	97	75%	114	88%
5th	EES	Cordaid, HLSS, CCM	142	96	68%	124	87%
6th	Warrap	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF	119	74	62%	95	80%
7th	Unity	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS	88	57	65%	69	78%
8th	Lakes	Doctors with Africa (CUAMM), LIVEWELL	113	74	65%	86	76%
9th	Upper Nile	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID	119	63	53%	75	63%
10th	Jonglei	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA	104	33	32%	34	33%
	South Sudan		1221	845	69%	988	81%

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 69% and completeness was 81%. (6) states were above the target of 80% with highest reporting rate in WES.

IDSR timeliness & completeness performance at county level for week 49 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	Wulu	Doctors with Africa (CUAMM)	14	14	100%	14	100%
Lakes	Rumbek East	Doctors with Africa (CUAMM)	24	24	100%	24	100%
Lakes	Awerial	Doctors with Africa (CUAMM)	7	7	100%	7	100%
Lakes	Rumbek Centre	Doctors with Africa (CUAMM)	23	23	100%	23	100%
NBGZ	Aweil South	Malaria Consortium(MC),IHO	9	9	100%	9	100%
CES	Yei	SSUHA	17	17	100%	17	100%
CES	Terekeka	HealthNetTPO	20	20	100%	20	100%
CES	Juba	HLSS	46	45	98%	45	98%
WBGZ	Jur River	Cordaid	35	34	97%	34	97%
NBGZ	Aweil West	HealthNetTPO	37	35	95%	35	95%
NBGZ	Aweil Centre	Malaria Consortium(MC)	15	14	93%	14	93%
Lakes	Cuelbet	Doctors with Africa (CUAMM)	15	13	87%	13	87%
WBGZ	Wau	Cordaid	28	24	86%	24	86%
NBGZ	Aweil East	IRC,TADO	36	30	83%	30	83%
CES	Kajo Keji	SSUHA,GOAL,TRI-SS	17	14	82%	14	82%
CES	Morobo	SSUHA,THESO	5	4	80%	4	80%
NBGZ	Aweil North	HealthNetTPO,IHO	33	26	79%	26	79%
WBGZ	Raja	HealthNetTPO	14	10	71%	10	71%
CES	Lainya	SSUHA	16	10	63%	10	63%
Lakes	Yirol West	Doctors with Africa (CUAMM)	12	5	42%	5	42%
Lakes	Rumbek North	Doctors with Africa (CUAMM)	7	0	0%	0	0%
Lakes	Yirol East	Doctors with Africa (CUAMM),LIVEWELL	11	0	0%	0	0%

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
WES	Nzara	World Vision International	20	20	100%	20	100%
Unity	Abiemnhom	Cordaid	4	4	100%	4	100%
Unity	Panyijjar	IRC	15	15	100%	15	100%
Unity	Mayom	CASS	9	9	100%	9	100%
WES	Nagero	World Vision International	10	10	100%	10	100%
WES	Mundri West	CUAMM	21	21	100%	21	100%
WES	Maridi	AMREF	26	26	100%	26	100%
WES	Ibba	AMREF	11	11	100%	11	100%
WES	Mundri East	CUAMM	19	19	100%	19	100%
WES	Yambio	World Vision International	42	42	100%	42	100%
WES	Ezo	World Vision International	27	27	100%	27	100%
WES	Mvolo	CUAMM	11	11	100%	11	100%
Unity	Leer	UNIDOR	11	10	91%	10	91%
WES	Tambura	World Vision International	28	25	89%	25	89%
Unity	Rubkona	Cordaid,IRC,IOM,M SF	15	13	87%	13	87%
Unity	Mayendit	CASS	12	10	83%	10	83%
Unity	Guit	CHADO	7	5	71%	5	71%
Unity	Koch	CRADA,IRC.	5	3	60%	3	60%
Unity	Pariang	CARE International	11	0	0%	0	0%

IDSR timeliness & completeness performance at county level for week 49 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
EES	Ikotos	HLSS	27	27	100%	27	100%
EES	Torit	Cordaid	20	20	100%	20	100%
EES	Kapoeta South	CCM	10	10	100%	10	100%
Jonglei	Fangak	CMD,HFO	16	15	94%	15	94%
EES	Kapoeta North	CCM	16	15	94%	15	94%
EES	Lopa Lafon	HLSS	18	16	89%	16	89%
Jonglei	Pochalla	LIVEWELL	7	6	86%	6	86%
Jonglei	Pibor	LIVEWELL,CRADA	5	4	80%	4	80%
EES	Magwi	HLSS	22	17	77%	17	77%
EES	Budi	Cordaid	21	15	71%	15	71%
Jonglei	Ayod	CMD,EDA	15	7	47%	7	47%
EES	Kapoeta East	CCM	12	3	25%	3	25%
Jonglei	Nyiroi	CMA,Malaria Consortium	10	2	20%	2	20%
Jonglei	Bor	MDM + JDF	35	0	0%	0	0%
Jonglei	Akobo	NILE HOPE	8	0	0%	0	0%
Jonglei	Twic East	MDM + JDF	11	0	0%	0	0%
Jonglei	Canal Pigi	IMC	11	0	0%	0	0%
Jonglei	Duk	MDM + JDF	15	0	0%	0	0%
Jonglei	Uror	Nile Hope,Malaria Consortium	8	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 South	CCM	12	12	100%	12	100%
Upper Nile	Melut	WVI + RI	8	8	100%	8	100%
Upper Nile	Panyikang	IMC	4	4	100%	4	100%
Warrap	Twic	GOAL	26	25	96%	25	96%
Warrap	Tonj North	CCM	14	13	93%	13	93%
Warrap	Tonj East	CCM	12	10	83%	10	83%
Upper Nile	Maban	WVI,RI,Samaritans Purse	17	14	82%	14	82%
Upper Nile	Maiwut	RI	5	4	80%	4	80%
Upper Nile	Fashoda	CORDAID	13	10	77%	10	77%
Upper Nile	Luakpiny Nasir	UNKEA,RI	15	11	73%	11	73%
Warrap	Gogrial East	GOAL	15	10	67%	10	67%
Warrap	Gogrial West	GOAL	31	20	65%	20	65%
Upper Nile	Makal	IMC	7	4	57%	4	57%
Upper Nile	Longechuk	RI	9	5	56%	5	56%
Upper Nile	Renk	WVI + RI	13	7	54%	7	54%
Warrap	Abyei	AAA,Save the Children,MSF	10	5	50%	5	50%
Upper Nile	Manyo	CORDAID	10	5	50%	5	50%
Upper Nile	Ulang	UNKEA,RI	14	3	21%	3	21%
Upper Nile	Baliet	IMC	4	0	0%	0	0%
Upper Nile	Akoka	IMC	5	0	0%	0	0%



Surveillance: EWARS performance indicator by partner for week 49 of 2020

Partner	HFs	Reporting		Performance	
		# of reports received on Time	No. of HFs Reported regardless of time	Timeliness	Completeness
IRC	1	1	1	100%	100%
GOAL	2	2	2	100%	100%
IMC	6	6	6	100%	100%
Medicair	2	2	2	100%	100%
UNH	2	2	2	100%	100%
IOM	12	12	12	100%	100%
UNIDOR	2	2	2	100%	100%
World Relief	2	2	2	100%	100%
MSF-E	6	4	6	67%	100%
RHS	1	0	1	0%	100%
MSF-H	5	2	3	40%	60%
TRI-SS	2	1	1	50%	50%
HFO	2	1	1	50%	50%
HFD	6	1	3	17%	50%
HAA	2	0	0	0%	0%
CMD	1	0	0	0%	0%
Medair	2	0	0	0%	0%
TOTAL	56	38	44	68%	79%

Completeness was 79% and timeliness was 68% for weekly reporting in week 48, 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	EBS	Covid-19	Total alerts
CES	1		3						4
EES		1	4	2	1				8
Jonglei					3			2	5
Lakes		2	2						4
Unity				1				1	2
Upper Nile		6	4		2	1		1	14
Warrap			2						2
WBGZ			3	2	1		1		7
WES		3	5		23			1	32
Total alerts	1	12	23	5	30	1	1	5	78

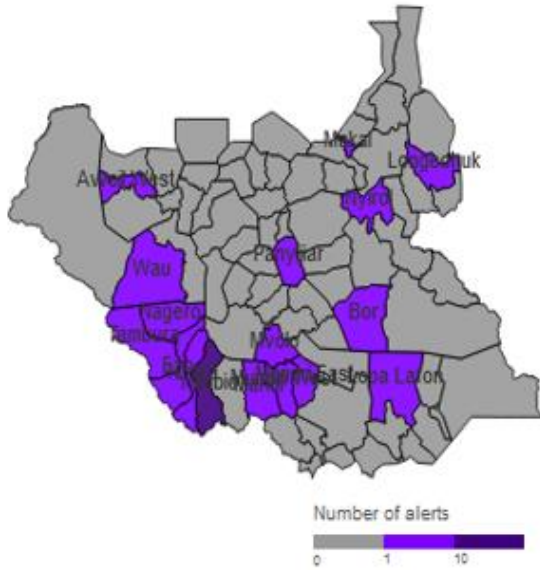
During this week:

- 12 ARI alert: **3** from WES sample collected and tested in Yambio hospital; **4** from Upper Nile, VTMs and Cartridges to be delivered by NPHL team on 14 Dec 2020; **1** from EES and the sample was tested in the sentinel site (Torit Hospital); **2** from Lakes and the area is not accessible due to floods.
- 23 AWD alert: **3** from CES and; **4** from EES but the facilities are not accessible due to bad roads; **1** from Lakes sample collected; **4** from Upper Nile sample collected; **2** from Warrap sample collected; **3** from Wau; **5** from WES and the are collected for testing
- 5 ABD alert: **2** from EES; **1** from NBG; **1** from Unity; **2** from WBG
- 30 Malaria alerts: **1** from EES (Lopa Lafon); **2** from Jonglei (Bor); **1** from Upper Nile (Malakal); **1** from WBG (Wau); **23** from WES (Yambio, Ezo, Mundri west and Mundri East, Tambura, Maridi, Mvolo, Ngero, Ezo and Nzara)
- 1 Measles alert: **1** from Upper Nile (Renk County) still under following because the number of the SSO and CSO is not reachable.
- 5 COVID-19 alert: Melut **1**; Rubkona **1**; Ibba **1** and Nyirol **1** all are investigated, and sample collected.
- 1 AJS alert: **1** from Kimu phcc in Juba County and urine sample was collected and it was positive for Juandice hence the case is under treatment in Kimu PHCC.

Alert: Map of key disease alerts by county of week 49 of 2020



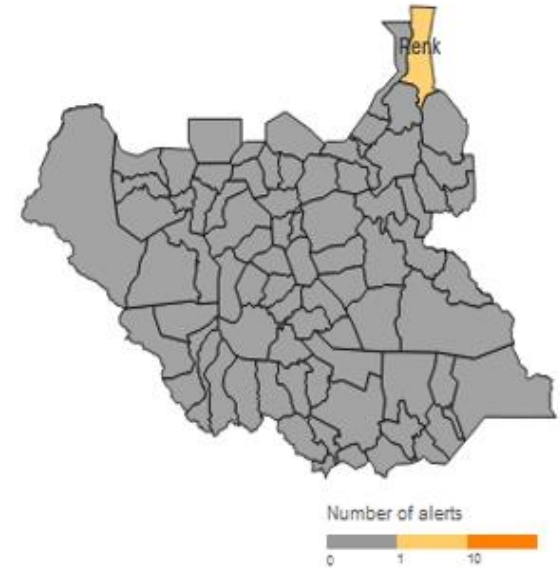
Map 2a | Malaria (W49 2020)



Map 2b | Bloody diarrhoea (W49 2020)



Map 2c | Measles (W49 2020)



73%	80%	% verified
0%	0%	% auto-discarded
3%	1%	% risk assessed
0%	1%	% requiring a response

W49	Cumulative (2020)	
0	13	Low risk
5	5	Medium risk
1	29	High risk
1	59	Very high risk

SUSPECTED OUTBREAKS



Major suspected outbreaks in South Sudan in
2020



Update on RVF investigations and Preparedness activities – Yirol

- Following reports of 175 abortions and 15 deaths in cattle in Yirol in August 2020; joint investigations were conducted by the Ministry of Livestock and Fisheries, Ministry of Wildlife, and FAO from 29 October 2020 to 5 November 2020.
- A total of 53 animal samples were collected (48 cattle and 5 small animal ruminants) with preliminary testing showing that 20 samples were positive for brucellosis; 4 were positive for RVF IgG; 6 were positive for RVF IgM.
- The samples are to be shipped to a reference laboratory in South Africa.
- A joint (One Health partners) team to be sent to Yirol to conduct further investigations, strengthen surveillance, build community awareness on RVF and collect more animal and human samples.



ONE HEALTH RVF ALERT INVESTIGATIONS AND READINESS ENHANCEMENT IN YIROL

Assess spillover of RVF to Humans

- 12 samples from human and 4 samples from animals have been collected and will be shifted on 10 Dec 2020.
- Preliminary PCR testing at NPHL showed that all the 12 human samples were negative for RVF. Follow up serological testing is planned at UVRI.
- Prepositioned IPC materials and outbreak investigation kits
- 33 health workers have been oriented on RVF and ILI/SARI case definition in five health facilities
- RVF Case definitions were distributed to 33 health workers
- Met and agreed with officials from the State Ministry of Agriculture, forestry, Animal Resource and Fisheries to work together: Surveillance/investigation, information sharing and coordination

Scaling up risk communication

- Sensitized state government officials (led by Hon Secretary General for former Eastern Lakes State), County and Community authorities (led by Acting Commissioners and Payam Administrators) on RVF situation in Birds and Animals in Yirol and their roles in the fight to mitigate the spread of RVF from animals to Human
- Government authorities and community leaders had agreed to further continuously sensitizing the communities in any forums
- Community awareness is in progress to mitigate risk of RVF spreading from animals to human by observing RVF preventive measures
- Encouraged integration of all Community resources networks (ICMN, Hygiene promoters, nutrition workers, EPI team, Animal health workers, Polio team and BHI workers) to support risk communication and AHR surveillance in Human and Animals





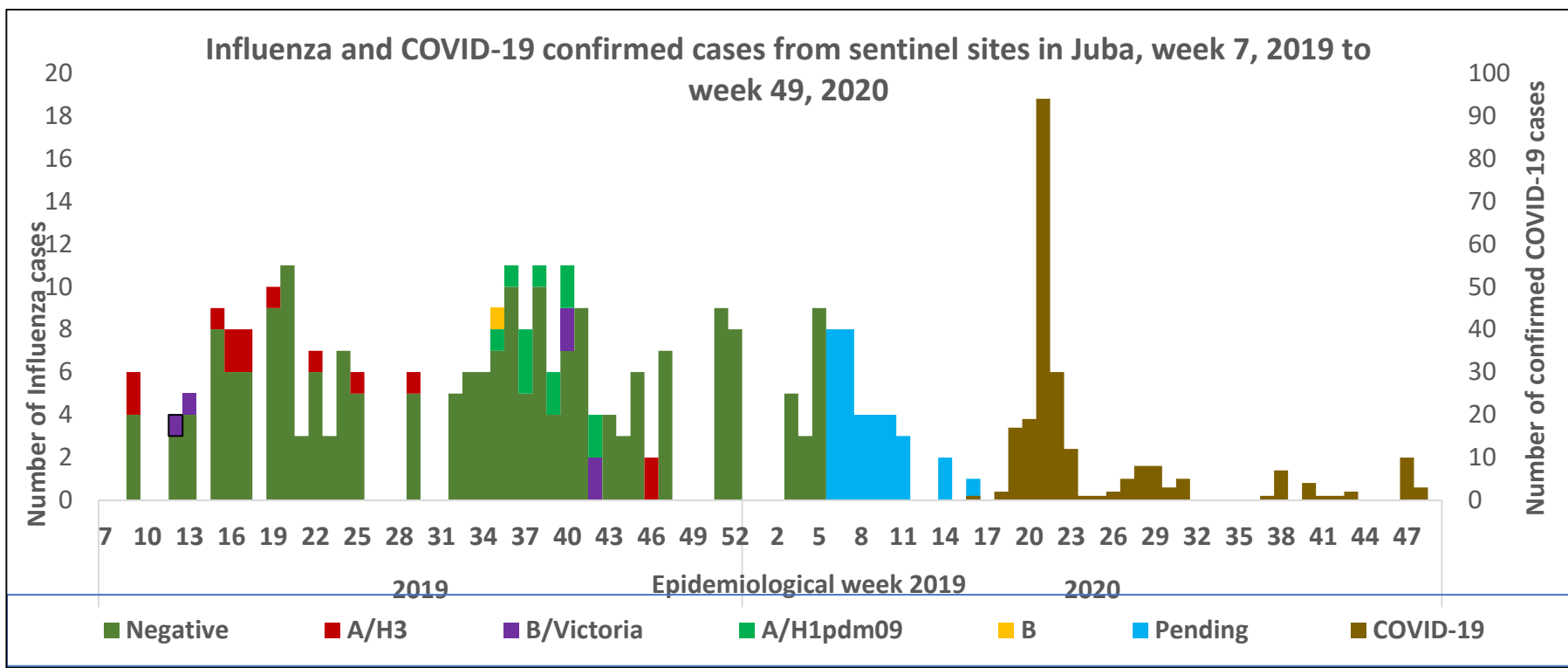
Malaria was the leading cause of morbidity and mortality, accounting for **57.9%** of all morbidities and **2.8%** of all mortalities this week.

There were **5 Counties** with malaria trends that exceeded the threshold (third quartile of trends for the period 2013-2017) and these include the following:

- 1. CE State (Juba)**
- 2. Warrap State (Twic Mayardit)** ▣
- 3. WBGz State (Wau)**
- 4. Unity State (Rubkona)**
- 5. NBGz State (Aweil North)**

In the PoC sites; malaria is the top cause of morbidity in Bentiu (**34%**); Juba (**70%**), and Wau (**37%**) PoCs, in Malakal PoC malaria accounts for (**9%**) of OPD consultations, respectively.





- 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 4019 samples have been collected in 2020 with 233 (5.7%) being positive for COVID-19 in Juba. These sentinel samples have not been tested for influenza in 2020 due to lack of influenza test kits.

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS



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





Flooding, South Sudan, week 49, 2020

- Jonglei, GPAA Pibor and Lakes are the most affected locations. Despite the reported receding water levels in some counties in these locations, the consequences of the flooding will continue to be felt for the coming weeks. Furthermore, as water levels continue to recede, the resultant mud will impede humanitarian movement. The priority counties where the response is ongoing in Jonglei include Bor South, Ayod, Nyirol, Duk, Twic East and GPAA Pibor. In Lakes, a recent assessment in Rumbek North indicated that **2930** HHs (**14650** individuals) have been displaced. The displaced population has been integrated into the host community. New affected locations that reported flooding episodes in the past two weeks include Panyagor in Twic East, Labarab (about **30,000** people) in GPAA Pibor, Aweil West (**2,422** HHs), Aweil North (**2,500** HHs), Akobo East (**13,500** people) and Uror (**69,000** people).

Health Cluster Response:

- I. Health cluster partners have reached 56 754 people out of 617,000 people in need of health response. The low coverage is attributed to limited resources available to the partners. WHO mobile medical teams in Pibor continue to provide mobile services in floods-affected locations in Pibor
- II. WHO and implementing partners are in the final stage of preparation for the oral cholera campaign in Pibor and Bor South. In Bor South, WHO will support the state to implement the campaign along with other health partners and the first round of the campaign is expected to begin on 14 December 2020. In Pibor, the county health department will be supported by IOM to implement the preventive cholera vaccination campaign and the campaign is expected to begin on 15 December 2020. WHO technical officers in Pibor will work along with the implementing partner to provide the required technical and operational support for the campaign. The OCV campaign in Pibor will target 93,250 people while in Bor County 74,846 individuals will be targeted. Oral cholera campaigns are informed carried out as preventive measures and to complement water, hygiene and sanitation improvement measures.



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	2	414 (0.004)	Yes	No	Yes	Yes
Measles	Bentiu PoC	24/04/2019	NR	482 (0.006)	Yes	Yes	Yes	N/A
Measles	Pibor	27/1/2020	1	355 (0.0028)	Yes	Yes	Yes	N/A
Measles	Ibba	25/1/2020	0	40 (0.345)	Yes	Yes	Yes	N/A
Measles	Wau	5/1/2020	2	39 (0.051)	Yes	Yes	Yes	N/A





- Measles outbreaks confirmed in 2020

- 8 counties – Tonj East, Magwi, Bor, Kapoeta East, Tonj South, Wau and Pibor

- Locations with ongoing measles transmission

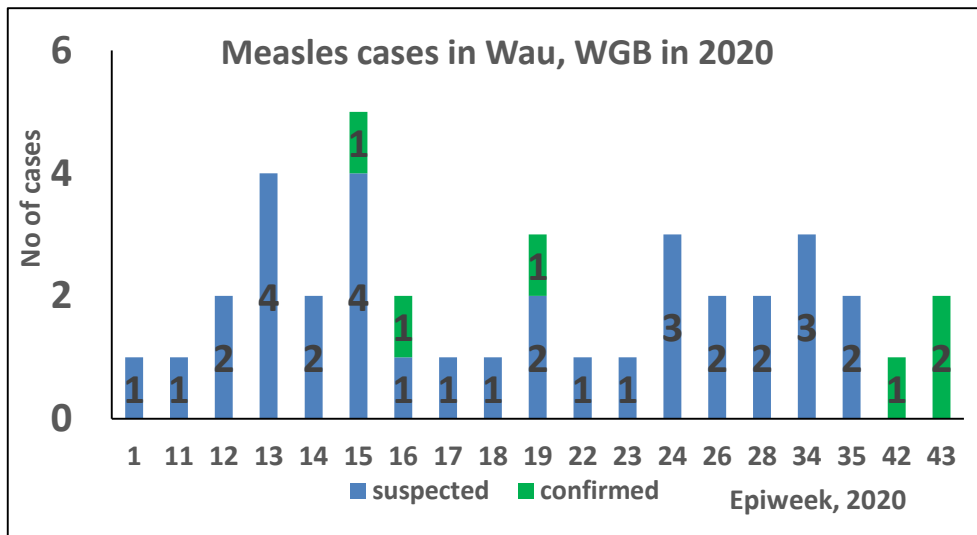
- Pibor County
 - Wau County
 - Ibba County



Confirmed Measles outbreak in Wau County

Summary

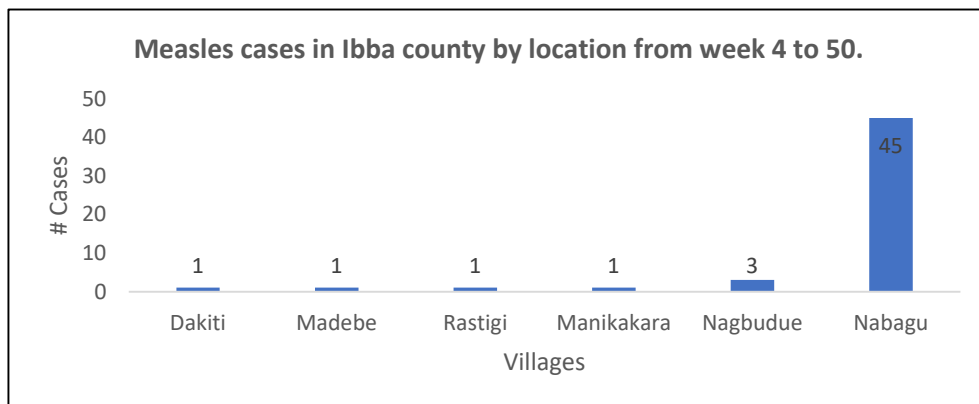
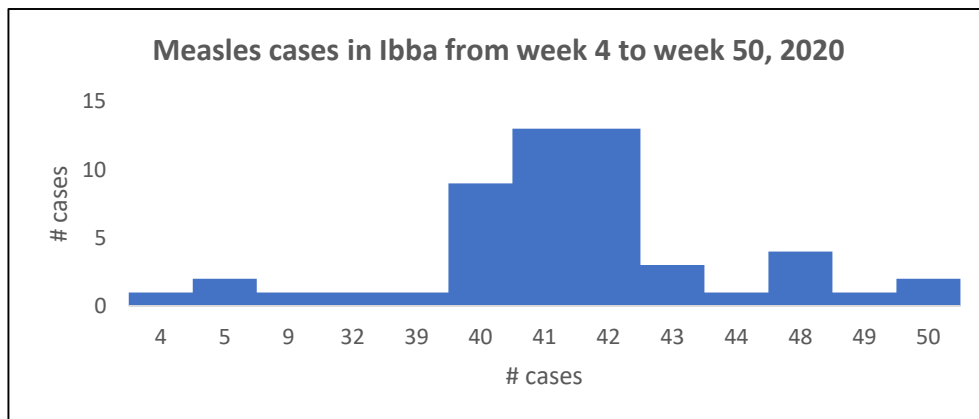
- No new cases reported since confirmation of the three cases in week 42, 2020
- A total of 39 cases (no deaths) reported from epi week 1 to 43
- More than (59%, 23/39) are children <5 years
- 62% (24/29 cases) are female
- Residence: The cases reported from Wau (25 cases), Raja (5cases) and Jur River (9 cases).
- 27/39 (69%) of cases were not vaccinated for measles.
- 4/39 (10%) were managed as inpatients
- WBG had conducted measles follow up campaign early 2020 with a coverage of xx%



Response

- The state monthly health & nutrition sector coordination meeting: CHD and partners resolved to respond to confirmed measles cases by strengthening routine immunization; social mobilization; and measles surveillance
- State responded to an earlier outbreak confirmed in June 2020 by conducting focused outbreak response where the affected locations were targeted for outreaches and enhanced RI and surveillance

Confirmed Measles Outbreak in Ibba



Age group	Cases	Percentage	CUM. %
0 - 4 Years	18	35%	35%
10 - 14 Years	11	21%	56%
15 + Years	9	17%	73%
5 - 9 Years	14	27%	100%
Grand Total	52	100%	

Background and descriptive epidemiology

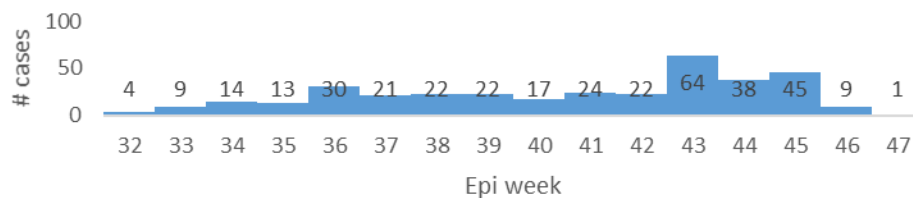
- Measles transmission has persisted in Ibba county despite of the mass vaccination, and the follow up campaign was completed for the two counties – the coverage was 99%
- Suspected measles cases were reported, and two samples tested measles IgM +e.
- 2 cases were reported in week 50, makes a total of 52 cases since beginning of 2020
- 35% of the cases are less than 5 years of age
- 40% are female and 60% male
- Most affected areas are Nabagu and Nagbudue
- Measles follow up campaign, achieved 99% early 2020

Response Actions:

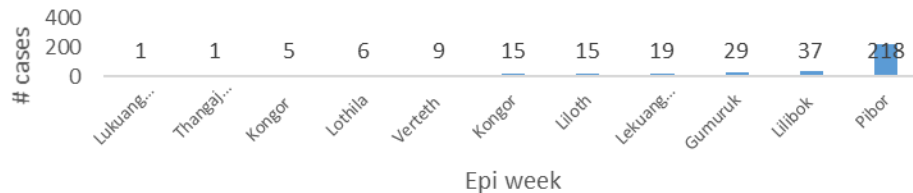
- An assessment mission recommended the need to strengthen routine immunization (thru static and outreach vaccination; social mobilization for routine immunization; and enhanced measles case-based surveillance).
- The implementing NGOs, (Action Africa help (AAH) responded through enhanced routine vaccination outreaches to the affected and at-risk villages but these were not optimized due to resource constraints.

Confirmed Measles Outbreak in Pibor

Epi curve for measles cases in Pibor from week 32 to week 47, 2020.



Measles cases in Pibor county by location from week 32 to week 47, 2020.



Background and descriptive epidemiology

- Measles transmission has persisted in Pibor county despite of the vaccination campaigns conducted in February and March and October 2019
- Suspected measles cases were reported from Pibor; five sample were sent to Juba and tested measles IgM +e positive.
- 1 case were reported in week 47, makes a total of 355 since beginning of 2020
- 88% of the cases are less than 5 years of age
- 50% are female and 50% male
- Most affected areas are Lekuangole

Response Actions:

- Reactive campaign completed in Pibor (5373 vaccinated- 95%), Verteth (944 vaccinated- 66%) Lukuangole (9014 vaccinated- 174.00%) Gumuruk (6886 vaccinated- 118%)
- The locations that could not be reached during the campaign need to be planned for and visited when they are accessible

Age group	Cases	Percentage	CUM. %
1 - 4 Years	314	88%	88%
10 - 14 Years	6	2%	90%
15 + Years	2	1%	91%
5 - 9 Years	33	9%	100%
Grand Total	355	100%	

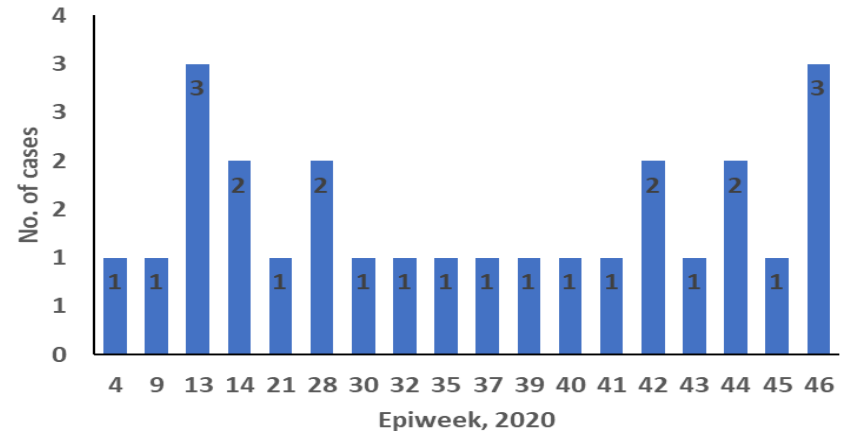


Suspected HEV Outbreak in Abyei

Background and descriptive epidemiology

- On 16th November 2020, the Abyei AA MoH reported increasing cases of suspect Hepatitis E virus (HEV).
- A total of 26 suspect cases have been line listed from week 3 to week 45, 2020.
- Warrap State RRT and WHO Kwajok hub were deployed to Agok on Sunday (22nd November) to conduct further epidemiological investigations and together with partners on ground conduct WASH assessments
- *Age distribution*: 1/26 (3.85%) are <5 yrs of age
- **Gender**: 18/26 (69%) are male and 8/26 (31%) were female
- **Outcome**: 2 deaths (24 & 32 years) CFR 7.6%
- **Affected areas**: Most affected location is Rumammer has 15/26 (58%) cases, other locations are Turalei, Abienmhom, Abyie

Epicurve of suspected HEV cases in Abyei, 2020

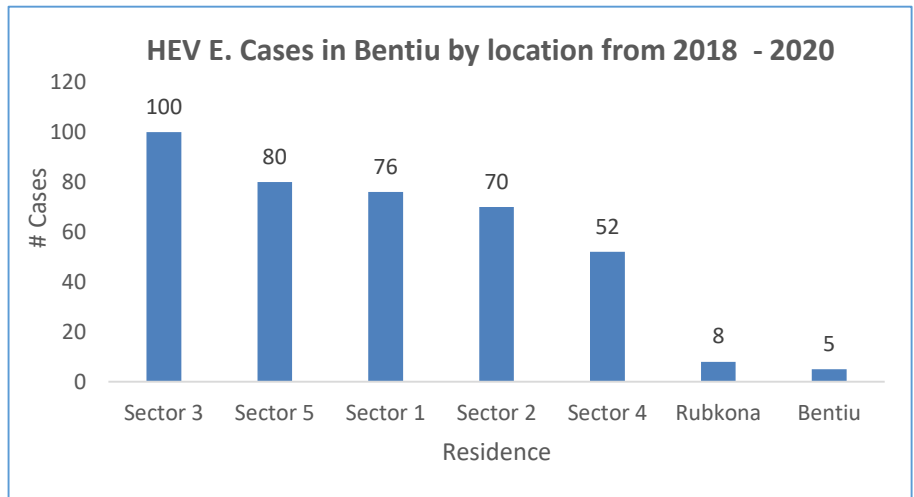
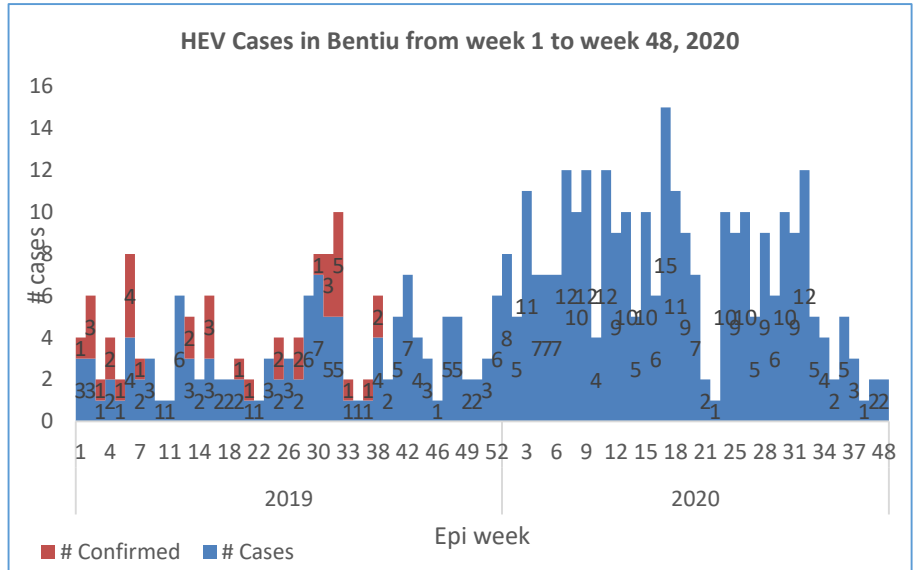


Response

- Awaiting PCR results for four samples sent to UVRI
- Continue line-listing and case management
- Health partners and facilities to provide case management paying attention to pregnant mothers and patients with underlying liver diseases who are likely to develop severe disease and poor outcomes
- Water quality testing and WASH assessment done and findings to be shared with WASH cluster for action



Hepatitis E, Bentiu PoC (1)



Descriptive epidemiology

- The persistent transmission of HEV in Bentiu PoC continues with 414 cases since beginning of 2019
- There were (2) new cases reported in week 48, 2020
- All the cases were managed as outpatient cases except for seven cases who were admitted
- 5 deaths reported in 2019 and 2020
- 49% are female and 51% 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 47, 2020; there were 414 cases of HEV in Bentiu PoC including 5 deaths (CFR 0.012%)

Age-Group	Alive	Dead	Grand Total	Percentage	CFR	Cum. %2
1 - 4 Years	128		128	31%	0%	31%
10 - 14 Years	66		66	16%	0%	47%
15+ Years	101	3	104	25%	3%	72%
5 - 9 Years	114	2	116	28%	2%	100%
Grand Total	409	5	414	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 Jerry cans 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
Measles	Aweil East	29/12/2019	NR	664 (0.127)	Yes	No		Yes



EBOLA VIRUS DISEASE[EVD] PREPAREDNESS IN SOUTH SUDAN



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



COVID-19 Updates

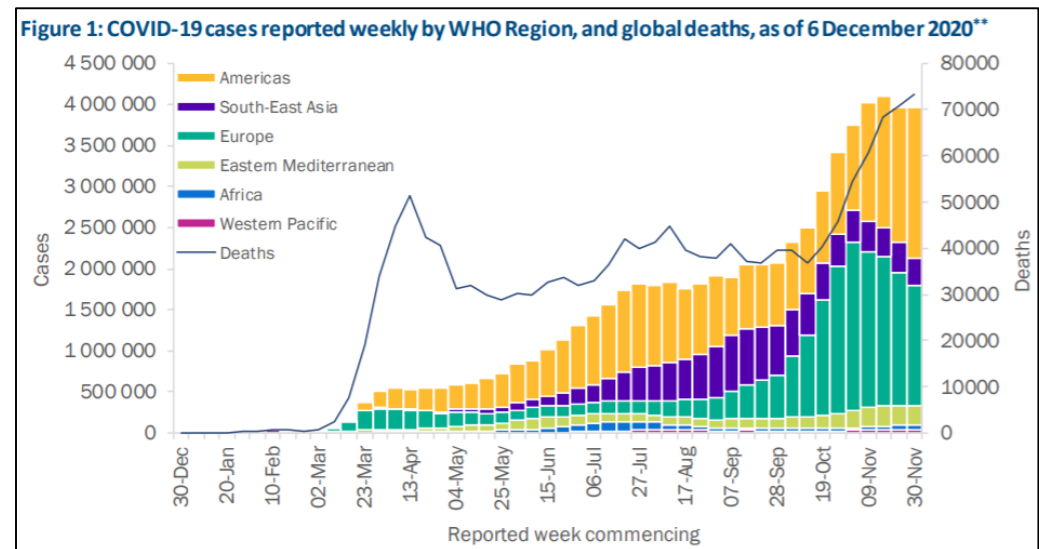


COVID-19 Virus Situation Summary



Situation update as of 8st December, 2020

- The COVID-19 pandemic initial cases were detected in Wuhan China
- Globally >65.8 million cases (> 1.5 million deaths)
- Africa > 1 547 607 million cases (>34 486 deaths)



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



- 3,181 confirmed COVID-19 cases in South Sudan; > 85% in Juba with 62 deaths and a case fatality rate (CFR) of 2.0%. Total 9,519 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, Medical Advisory Panel and the COVID-19 National Steering Committee



Overall Conclusions and Recommendations



Conclusion

- The overall IDSR and EWARN reporting performance in week 49, is above the target of 80%. (8) states were above 80%
- 3,181 confirmed COVID-19 cases in South Sudan; >85% in Juba with 62 deaths (CFR of 2.0%). Total 9,519 contacts identified, quarantined, & undergoing follow up
- A total of 1,563 COVID-19 alerts have been investigated with 1,374 (87.9%) being verified
- With eight outbreaks confirmed in 2020; measles remains the most frequent vaccine preventable disease
- There are ongoing measles outbreak in Pibor, Ibba and Wau 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>



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Notes

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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>

