

South Sudan

Integrated Disease surveillance and response (IDSR)

**Epidemiological Bulletin Week 36, 2021 (September 06-
September 12)**





- Hepatitis E virus case surge reported in Bentiu IDP settlement since week 36, 2021, total of 1,147 cases with 9 deaths (CFR 0.09%)
- Hemorrhagic Fever Outbreaks in West Africa (Marburg in Guinea & Ebola Virus Disease in Cote d'Ivoire)
- In week 36, IDSR reporting timeliness was 84% and completeness was 90% while timeliness was 81% and completeness 90% for EWARN sites.
- Of the 120 alerts in week 36; 61% were verified with malaria (34), measles (2), AWD (28), ARI (11) and ABD (17) were the most frequent alerts.
- Malaria remains the top cause of morbidity and accounted for 96,885 cases (65.9% of OPD cases).
- Of the 3,127 COVID-19 alerts detected, 2,916 (95.9%) have been verified with 11,650 confirmed cases and 120 deaths (CFR of 1.03%).
- Other hazards include floods (unseasonal) in over 11 counties

SURVEILLANCE PERFORMANCE



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



IDSR timeliness performance at State level for week 36 & 35 of 2021



Completeness States Ranking	States	Number of reporting sites	No. of HF's Reported on Time in WK 36	Timeliness Percentage of WK 36	No. of HF's Reported on Time in WK 35	Timeliness Percentage of WK 35
1st	WES	213	213	100%	213	100%
2nd	WBGZ	78	76	97%	63	81%
3rd	Jonglei	107	92	86%	86	80%
4th	CES	117	98	84%	106	91%
5th	NBGZ	114	95	83%	94	82%
6th	Warrap	134	111	83%	108	81%
7th	EES	143	113	79%	95	66%
8th	Lakes	113	88	78%	93	82%
9th	Unity	92	64	70%	54	59%
10th	Upper Nile	109	58	53%	63	58%
	South Sudan	1220	1008	83%	975	80%

KEY

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

The timeliness of IDSR reporting (supported by EWARS mobile) at health facility level in week 36, 2021 was 83% compared to 80% in week 35, 2021. only 6 states were above the target of 80%

Reporting challenges: Insecurity, internet access and new partners

IDSR completeness performance at State level for week 36 & 35 of 2021



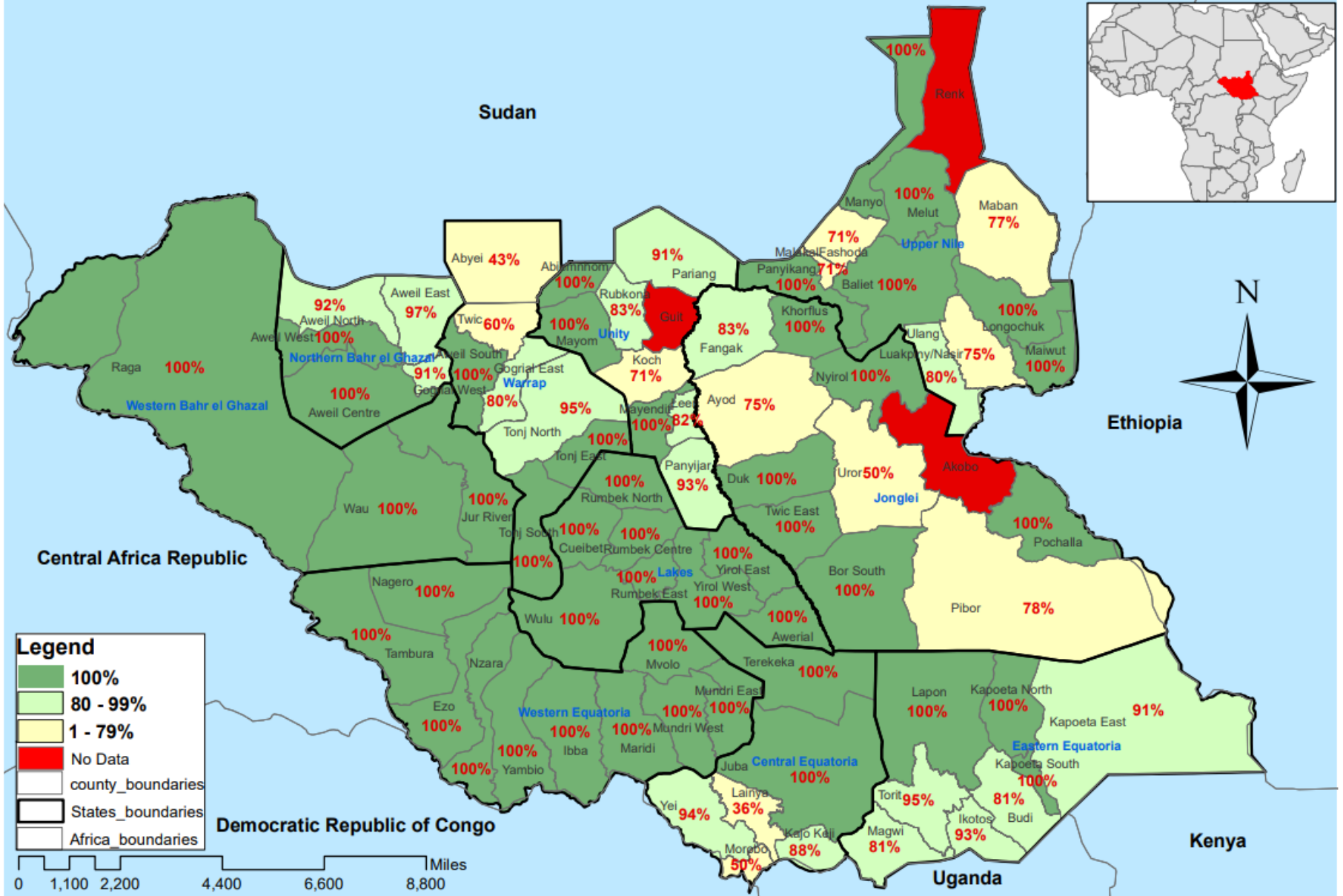
Completeness States Ranking	States	Number of reporting sites	No. of HF's Reported regardless of time in WK 36	Completeness Percentage of WK 36	No. of HF's Reported regardless of time in WK 35	Completeness Percentage of WK 35
1st	Lakes	113	113	100%	113	100%
2nd	WBGZ	78	78	100%	78	100%
3rd	WES	213	213	100%	213	100%
4th	NBGZ	114	111	97%	111	97%
5th	EES	143	134	94%	137	96%
6th	Unity	92	84	91%	78	85%
7th	Jonglei	107	95	89%	96	90%
8th	CES	117	102	87%	109	93%
9th	Warrap	134	112	84%	115	86%
10th	Upper Nile	109	83	76%	87	80%
	South Sudan	1220	1125	92%	1137	93%

KEY

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

The completeness of IDSR reporting (supported by EWARS mobile) at health facility level was **92%** in week 36 and **93%** in week 31, 2021. 9 states were above the target of 80%

Map of South Sudan Showing the Completeness (reporting) by County in week 36, 2021.



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.



Surveillance: EWARS timeliness performance indicator by partner for week 36 and 35 of 2021

Partner	HF's	Reporting	Performance		
PARTER	Number of reporting sites	# of reports received on Time in Week 36	Timeliness of Week 36	# of reports received on Time in Week 35	Timeliness of Week 35
CMD	1	1	100%	1	100%
IHO	2	2	100%	2	100%
IRC	1	1	100%	1	100%
TRI-SS	2	2	100%	2	100%
World Relief	2	2	100%	2	100%
ALIMA	3	3	100%	3	100%
SSHCO	1	1	100%	1	100%
RHS	1	1	100%	1	100%
UNIDOR	2	2	100%	2	100%
UNH	10	10	100%	10	100%
HFO	2	2	100%	1	50%
IOM	10	9	90%	10	100%
MSF-E	6	4	67%	4	67%
MSF-H	7	4	57%	5	71%
TADO	4	2	50%	4	100%
HFD	6	3	50%	5	83%
IMC	24	8	33%	23	96%
TOTAL	84	57	68%	77	92%

Timeliness for EWARS partners supported sites were at **68%** in week 36, 2021 compared to **92%** at week 35, 2021



Surveillance: EWARS completeness performance indicator by partner for week 36 and 35 of 2021

Partner	HF's	Reporting	Performance		
PARTER	Number of reporting sites	# of reports received regardless of Time in Week 36	Completeness of Week 36	# of reports received regardless of Time in Week 35	Completeness of Week 35
ALIMA	3	3	100%	3	100%
CMD	1	1	100%	1	100%
IHO	2	2	100%	2	100%
IRC	1	1	100%	1	100%
SSHCO	1	1	100%	1	100%
TADO	4	4	100%	4	100%
TRI-SS	2	2	100%	2	100%
RHS	1	1	100%	1	100%
HFO	2	2	100%	2	100%
UNH	10	10	100%	10	100%
World Relief	2	2	100%	2	100%
UNIDOR	2	2	100%	2	100%
IMC	24	24	100%	23	96%
IOM	10	9	90%	10	100%
HFD	6	4	67%	6	100%
MSF-E	6	4	67%	4	67%
MSF-H	7	4	57%	5	71%
TOTAL	84	76	90%	79	94%

Completeness for EWARS partners supported sites was at **90%** in week 36, 2021 compared to **94%** at week 35, 2021

EVENT-BASED SURVEILLANCE



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





State	Acute Jaundice syndrome	Acute Respiratory Infections (ARI)	Acute Watery Diarrhoea	AFP	Bloody Diarrhoea	Malaria	Guinea Worm	EBS	Covid-19	Total alerts
CES		2	3		1					6
EES			3		3	1		1		8
Jonglei		2	2	1	3	3			1	12
Unity	1	1	1		2	1			2	8
Upper Nile		2	5		1	1	1			10
Warrap			4						1	5
WBGZ			3			2				5
WES		3	3		3	20			4	33
Total alerts	1	10	24	1	13	28	1	1	8	87

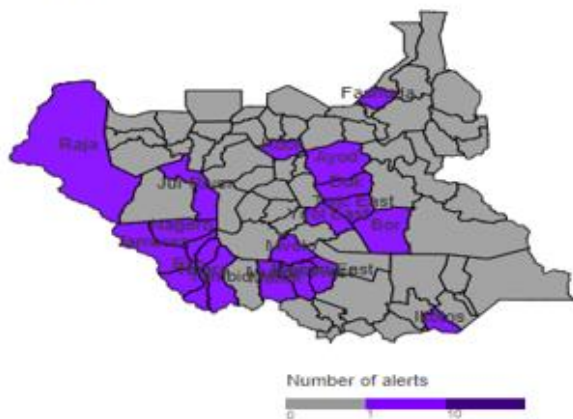
During this week:

- **10 ARI alert:** 2 from CES, 2 from Jonglei State, 1 from Unity State, 2 from Upper Nile State, 3 from WES
- **24 AWD alert:** 3 from CES, 3 from EES, treated for diarrhea, 2 from Jonglei State, 1 from Unity State, 5 from Upper Nile State, 4 from Warrap State, 3 from WBGZ, 3 from WES.
- **13 ABD alert:** 1 from CES, 3 from EES, 3 from Jonglei patients given treatment, 2 from Unity investigation under way, 1 from Upper Nile, and 3 from WES.
- **28 Malaria alerts:** 1 from EES, 3 from Jonglei State, 1 from Unity State, 1 from Upper Nile State, 2 from WBGZ State, 20 from WES, all these are due to the high increase of malaria cases in the Country.
- **8 COVID-19 alert:** 1 from Jonglei, 2 from Unity State, 1 from Warrap State and 4 from WES
- **1 EBS alert:** from EES, Ikotos County, in the villages of Lofayo, Ngutume and Kekerek in Ikoto Payam and reported to Ikotos PHCC by the chief of those villages about animals dying every day in their areas presenting with blood coming out from the mouth and also running nose.
- **1 AJS alert:** 1 from Unity State in Rubkona County, Bentiu PoC Hospital
- **1 Guinea Worm alert:** from Upper Nile State, Fashoda County and Bol PHCU
- **1 AFP alert:** from Jonglei State, Bor County in Werkok PHCC

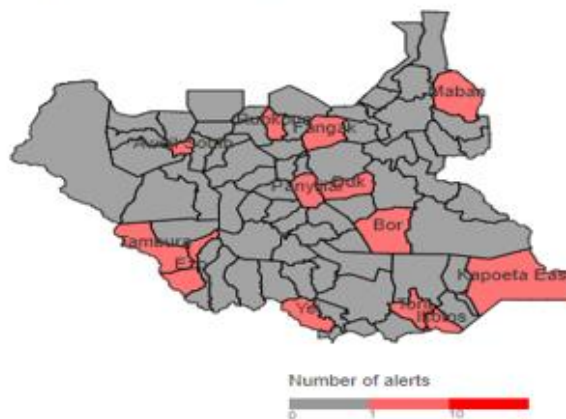
Alert: Map of key disease alerts by county of week 36 of 2021



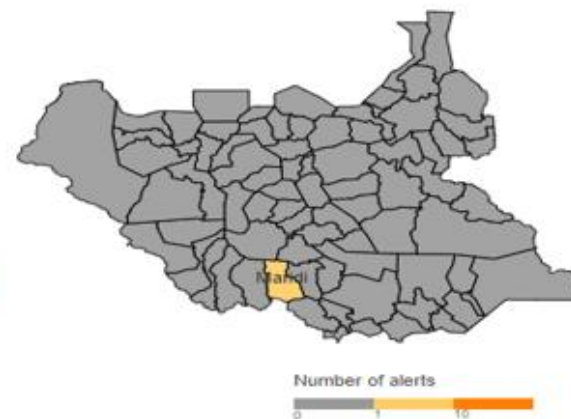
Map 2a | Malaria (W36 2021)



Map 2b | Bloody diarrhoea (W36 2021)



Map 2c | Measles (W36 2021)



Map 2e | Guinea Worm (W36 2021)



Map 2f | Event-based surveillance (W36 2021)



W36	Cumulative (2021)	
1	10	Low risk
9	9	Medium risk
0	53	High risk
0	149	Very high risk

77%	89%	% verified
0%	0%	% auto-discarded
2%	4%	% risk assessed
0%	3%	% requiring a response

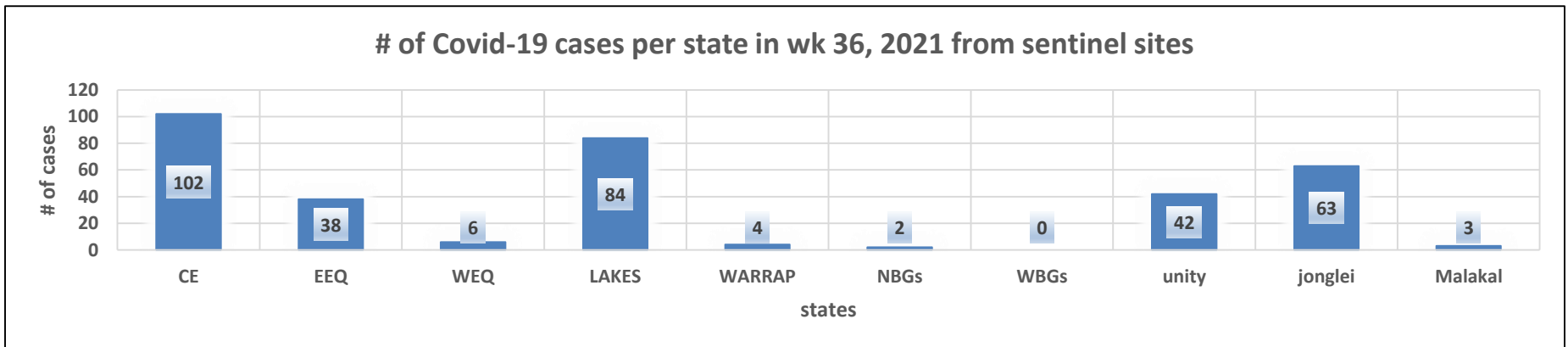
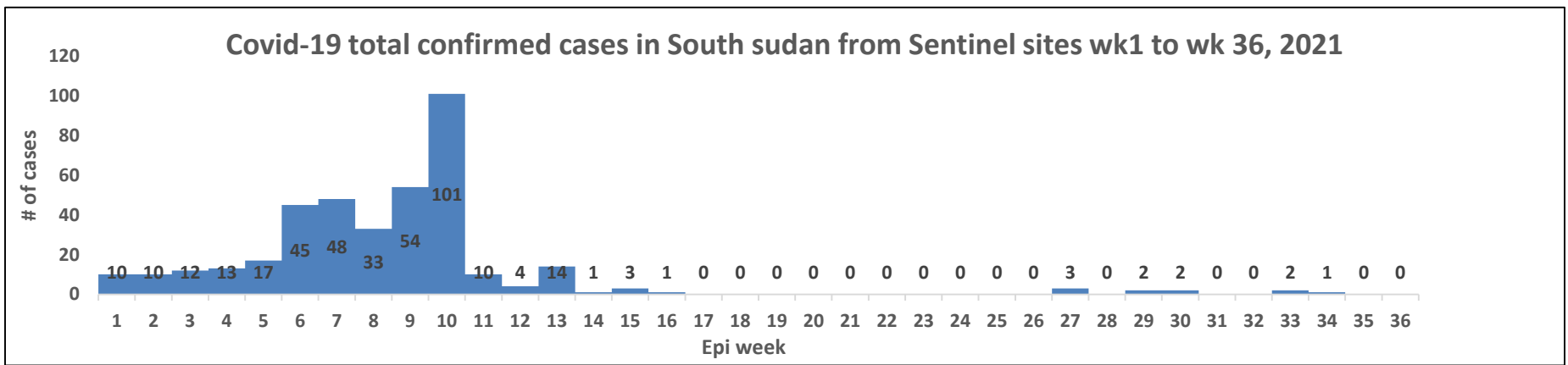
SUSPECTED OUTBREAKS



Major suspected outbreaks in South Sudan in
2020



Routine Sentinel Surveillance | Human Influenza



- As of 28th April 2021, a total of 166 samples were collected from three sentinel sites in Juba with 156 samples testing negative for influenza; one (1) positive for COVID-19; and six (8) positive for influenza B (with four (4) sub-typed as Victoria while the other two (2) are pending sub-typing)
- There are currently 13 Covid-19 designated sentinel surveillance sites in Juba and States Hospitals that are collecting epidemiological data and samples from Covid-19/ILI/SARI cases. A total of 7757 samples have been collected in 2021 with 550 (7.0%) being positive for COVID-19 from sentinel sites.

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS



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





- An estimated 90 000 people have been affected across 11 counties (**Ayod, Fangak, Renk, Guit, Gogrial West, Aweil South, Mayendit, Koch, Nhaildu-Rubkona and Malakal from Fangak**).
- A high-level humanitarian and government mission visited Ayod and Canal Counties on 4 August 2021 to witness the impact of the flooding in the counties.
- The heavy rains have damaged homes and agricultural fields forced families and their livestock to move to higher grounds and limited access to health and other essential services.
- The humanitarian community is responding by conducting assessments to outline the needs and damages, prepositioning of supplies, construction of dykes and acquiring alternative transport means in affected locations.
- In Greater Pibor Administrative Area, an early warning and disaster management committee was formed as part of the flood contingency plan.
- The Inter-cluster coordination group is currently finalizing an intersectoral response strategy that will guide the response measures of various clusters and stakeholders.
- There is a need for funding to support responding partners to institute ensure timely and life-saving interventions.



- Food insecurity remains a major concern in South Sudan where **7.2 million** people are projected to face high levels of acute (**IPC Phase 3+**) food insecurity during April-July 2021 as per the Integrated Food Security Phase Classification (IPC) report released in December 2020.
- In the six most affected counties (**Pibor, Akobo, Aweil South, Tonj North, Tonj South and Tonj East**), some **820 000** people were projected to face a crisis or worse levels of food insecurity while over **108 000** people were projected to be in **IPC Phase 5** catastrophe during the lean season.
- The humanitarian community and government has been responding in the affected counties since December 2020 through scaling up of access to life-saving food security and livelihood, health and nutrition, protection and WASH services and assistance.
- WHO and Health Cluster partners aim at reducing preventable mortality and morbidity by scaling up access to basic health and nutrition services, enhancing capacities of disease surveillance, prevention, detection and response to infectious disease outbreaks, and building resilience of the health system.

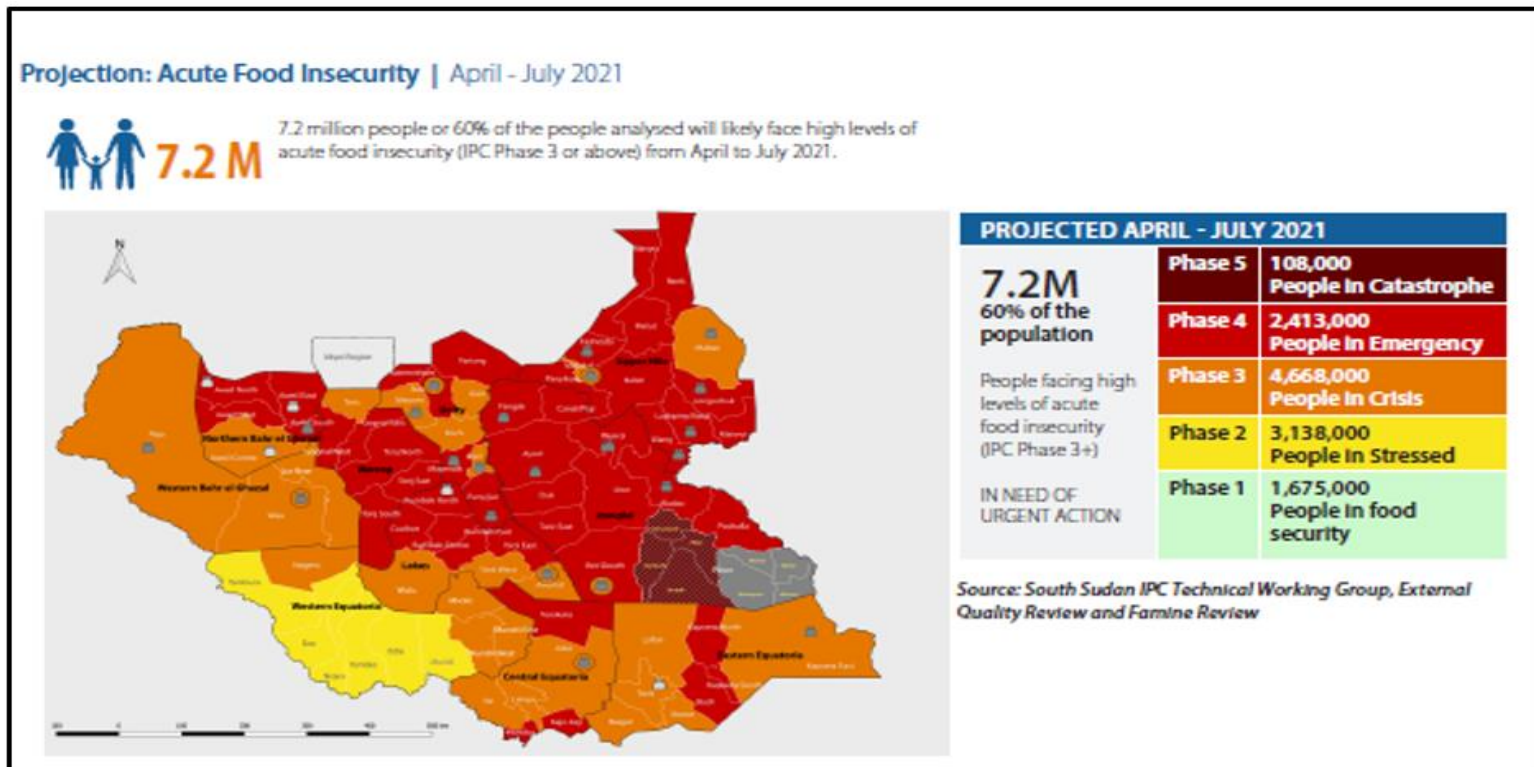


Figure 1: population estimates by IPC Phase and State based on the compilation of the South Sudan IPC Technical Working Group

- Frequent sub-national violence, attacks on humanitarian workers and properties, inadequate funding for essential supplies and weak health systems have continued to impede humanitarian operations in the priority locations.
- A 13% reduction in food prices was reported in July 2021 as compared to the previous two months.



Ongoing Response Activities:

- Partners provided primary health and nutrition through static and mobile health facilities. The emergency health partners funded by different donors are supporting to reach locations without functional health facilities. Since the beginning of 2021, 363 143 consultations have been conducted in the six priority counties as at end of week 30.
- WHO supported emergency partners operating in the six priority counties with the essential emergency supplies as the core pipeline manager, 249 interagency health kits (can support 249 000 people for three months), 106 pneumonia kits, 20 severe acute malnutrition with medical complication (SAM/MC) kits, and 45 cholera investigation kits to the responding partners in the priority counties.
- WHO supported the state ministries to capacity build 42 health workers on management of severe acute malnutrition with medical complications in Tonj North, Tonj East and Tonj South counties; Total of 116 (31 in Pibor, 45 in Akobo East, 40 in Aweil South) health workers and rapid response teams to strengthen the Integrated Disease Surveillance and Response (IDSR); Supported training of 40 participants on community-based surveillance in Aweil South. Further, a refresher training was conducted for 78 community surveillance focal points in Pibor and Akobo East Counties.

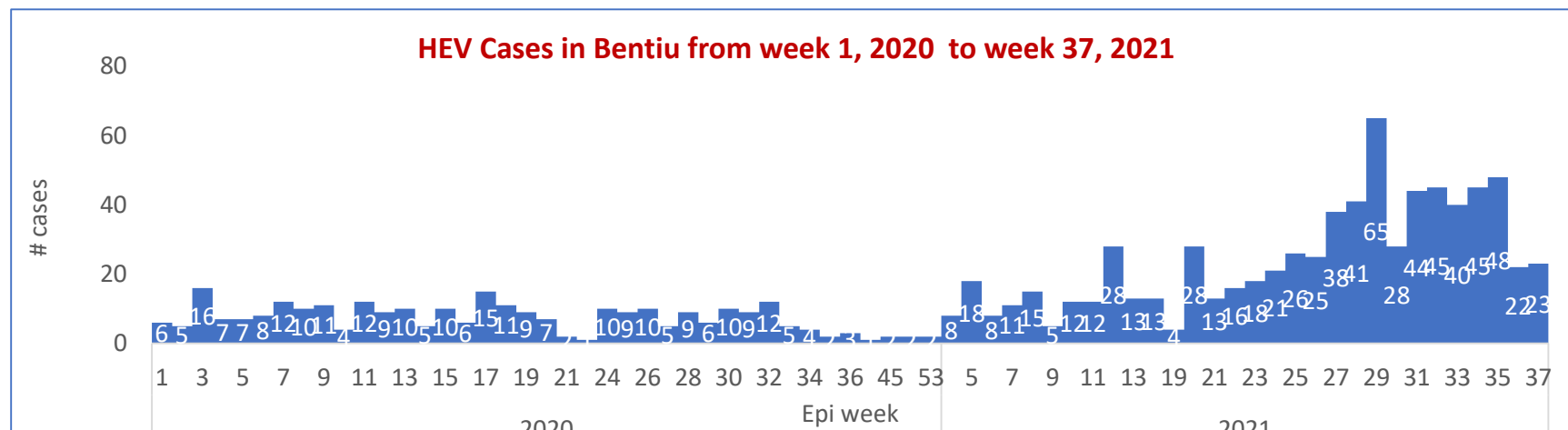


Aetiological agent	Location (county)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
					Case management	Vaccination	Health promotion	WASH
Ongoing epidemics								
Hepatitis E	Bentiu PoC	03/01/2018	23	1147 (0.020)	Yes	No	Yes	Yes
COVID-19	35 counties	05/4/2020	74	11,195 (0.006)	yes	yes	yes	yes
cVDPV2	25 counties	11/06/2020 18/09/2020	27	59	Yes	Yes	Yes	Yes





Hepatitis E, Bentiu IDP camp (1)

**Descriptive epidemiology**

- The persistent transmission of HEV in Bentiu IDP camp continues with **1,147** cases since beginning of 2019
- There were (**23**) new cases reported in week 37, 2021
- All the cases were managed as outpatient cases except for seven cases who were admitted
- 9 deaths reported in 2019, 2020 and 2021
- 48% are female and 52% are male.
- Age group less than 15 years had the most cases with (62%) cases.
- There is risk of adverse outcomes women are infected in their last trimester
- Use of unsafe drinking water is likely to be source of infection
- Up to week 37, 2021; a cumulative of 1,086 cases of HEV in Bentiu IDP camp including 9 deaths (CFR 0.07%)
- There is an upsurge of HEV cases since the beginning of 2021. The upsurge is attributed to declining WASH in the IDP camp as the daily workers and hygiene promoters have not been working for months now amidst reduced funding for WASH activities in IDP camp.



Ongoing Response

- The HEV taskforce has been activated to implement comprehensive HEV control interventions to interrupt transmission
- HEV strategy has been developed to guide implementation and mobilization of resources to support the response
- Deployment of WASH partners to initiate emergency WASH interventions including;
- Hygiene promotion; water quality surveillance; solid waste management etc.
- **Microplanning underway to import and deploy HEV vaccines targeting 57,000 individuals aged 16-40 years with two doses of HEV vaccine this year. Third dose to follow in the second quarter of 2022.**



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
Measles	Pibor	27/1/2020	NR	355 (0.0028)	Yes		Yes	Yes
Measles	Wau	5/1/2020	NR	39 (0.051)	Yes		Yes	Yes
Measles	Ibba	25/1/2020	0	55 (0.36)	Yes		Yes	Yes
Rubella	Tambura	11/1/2021	0	23 (0.13)	Yes		No	Yes
Rubella	Nagero	01/03/ 20201	0	5 (0.25)	Yes		No	Yes



COVID-19 Updates

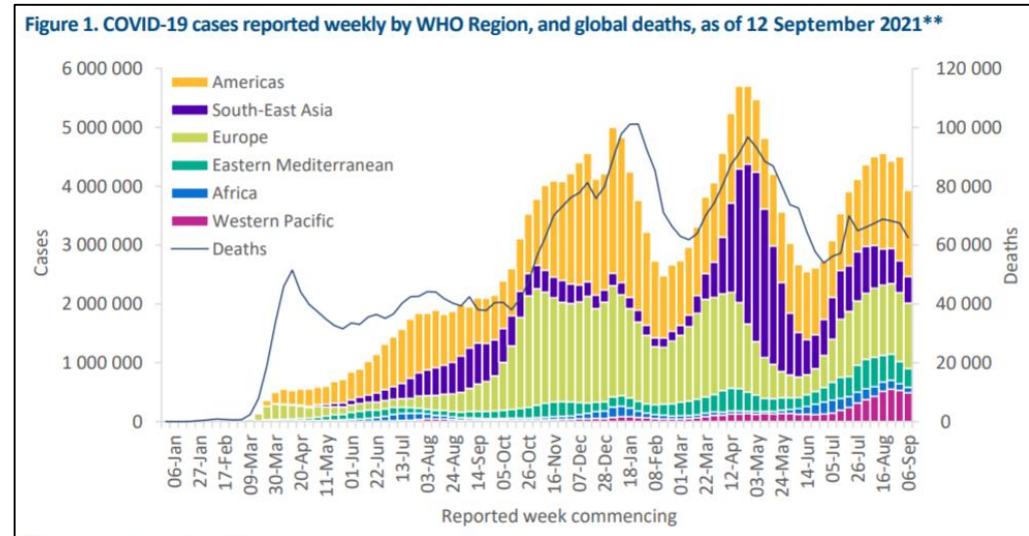


COVID-19 Virus Situation Summary



Situation update as of 12th September 2021

- **Globally, 12th September, there have been 224 180 411 confirmed cases of COVID-19, including 4 621 205 deaths, reported to WHO. As of 20 August 2021, a total of 4,562,256,778 vaccine doses have been administered.**
- **In Africa, as of 12th September 2021, there have been 5 813 020 confirmed cases of COVID-19, including 140 010 deaths reported to WHO**



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



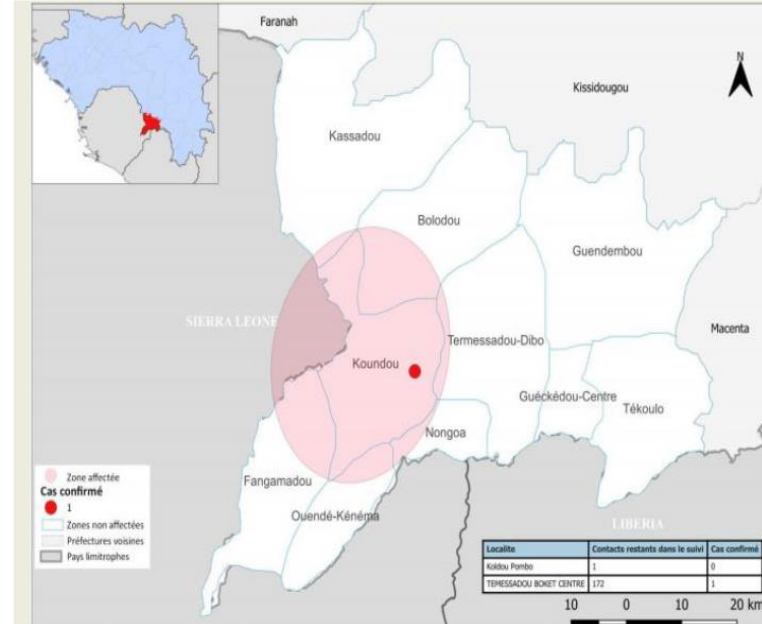
- One hundred and twenty-four new cases were identified in Week 36, bringing the cumulative number of confirmed cases to 11650, including 414 imported cases mainly from South Sudanese returnees (242), Uganda (53), and Kenya (19).
- At the end of Week 36, 35 (43.8%) of the 80 counties in the country have a confirmed case [Figure 1]. There was no county with a first confirmed case this week
- This week showed an 8.8% decrease in the number of reported cases compared to Week 35. This is first recorded decrease after five consecutive weeks of recorded increase in new cases
- Average positivity yields increased for five consecutive epi weeks, before falling to 2.4% this week
- Thirty alerts tested positive for COVID-19 this week. Cumulatively, 3127 alerts have been reported, of which 2999 (95.9%) have been verified, and 2916 (97.2%) of the verified alerts were sampled.
- Cumulatively, 17772 contacts have been listed and followed up since the first confirmed case was reported in April 2020, of which 15951 (89.8%) have completed follow-up.
- Different SARS-CoV-2 lineages were detected in South Sudan. The first variant of interest (VOI) detected in the South Sudan samples is the **A.23.1** lineage followed by lineages **B.1.525**; **B.1.35**; **B.1.1.7** and lastly lineage **B.1.617.2**
- South Sudan has exhausted its first batch of vaccines from the COVAX facility in Week 28. The second batch is expected in late-August. So far, South Sudan has vaccinated 57096 people, of whom 4763 are fully vaccinated and 52313 have received one dose.

Hemorrhagic Fever Outbreaks in West Africa (Guinea & Cote d'Ivoire)



- On August 3, 2021, notification was received of a community death of a 46-year-old in Koundou Sub-prefecture of Gueckedou Préfecture.
- On August 4, 2021 the deceased was confirmed as a case of Marburg Virus. To date, **173 contacts of the index Marburg case have been listed and 172 are under follow up.**
- **The Marburg outbreak is in the same locality (Gueckedou Prefecture) where an outbreak of EVD has recently been contained after five months and declared over on 19 June 2021.**
- By 19th June 2021, **23 EVD cases (16 confirmed, seven probable) of EVD including 12 deaths** were reported.

Map of Guinea showing location of confirmed case



Cette carte n'est fournie qu'à titre d'illustration. Les représentations ainsi que l'utilisation des frontières et des noms géographiques sur cette carte peuvent comporter des erreurs et n'impliquent ni jugement sur le statut légal d'un territoire, ni reconnaissance ou acceptation officielles de ces frontières de la part de l'OIM.

Date d'actualisation : 14-08-2021, Auteur : DPS de Gueckedou

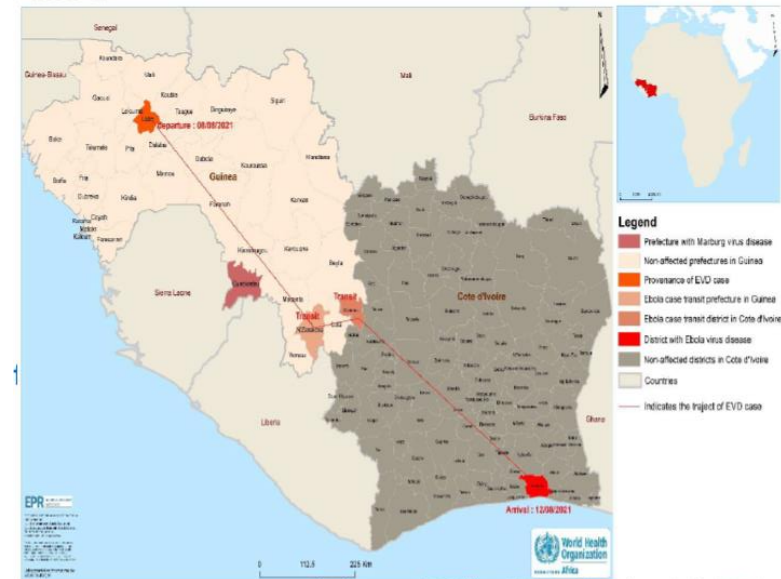
Sources : ANSS/OCHA/OIM/OMS, Contact : m.koulibaly@im.int

Carte : Présentation spatiale du cas confirmé de virus Marburg, Gueckedou, 2021



- **On August 14, 2021**, the Ministry of Health, Public Hygiene and Universal Health Coverage was informed by the Institut Pasteur in Cote d'Ivoire, of a positive case of Ebola Virus Disease (EVD) in the commercial capital of Abidjan, after arriving from Guinea.
- The index case is an 18-year-old girl of Guinean nationality who left Labé in Guinea for Abidjan by road. She arrived in Côte d'Ivoire **on August 11, 2021** after a five-day journey, was admitted for care **on August 12, 2021**, with symptoms of fever.
- **2 cases (1 confirmed and 1 suspected; 0 deaths and 9 contacts listed)**
- This is so far being treated as an isolated and imported case however preliminary genetic sequencing indicates possible linkage to the 2014-2016 EVD outbreak in Guinea.

Map showing Itinerary of the patient



Overall Conclusions and Recommendations



Conclusion

- The overall performance of IDSR and EWARN reporting sites in week 36, 2021 is above the target of 80% in both Timeliness and Completeness
- **11,650** confirmed COVID-19 cases (case fatality rate of 1.03%) 120 deaths. Total **17,772** contacts identified, quarantined, & undergoing follow up as of week 36, 2021
- Given the COVID-19 pandemic, and the third pandemic wave that is currently underway in Africa, resurgence monitoring and response readiness is being enhanced for all the pillars including surveillance, laboratory, case management, infection prevention and control, border health, and community engagement to emphasize adherence to public health social measures including vaccination of health workers, high risk groups, and the general population

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 resurgence monitoring and response readiness through identifying and testing suspect cases (including genomic sequencing), isolating and effective management of confirmed cases, contact tracing, community engagement, COVID-19 vaccination, and strengthening adherence to PHSMs.

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>



IDSR timeliness & completeness performance at county level for week 36 of 2021 (1)



STATE	COUNTY	Number of reporting sites	No. of HFs Reported on Time in WK 36	Timeliness Percentage of WK 36	No. of HFs Reported regardless of time in WK 36	Completeness Percentage of WK 36	No. of HFs Reported regardless of time in WK 35	Completeness Percentage of WK 35
Lakes	Rumbek North	7	7	100%	7	100%	7	100%
Lakes	Rumbek East	24	24	100%	24	100%	24	100%
NBGZ	Aweil Centre	15	15	100%	15	100%	15	100%
WBGZ	Raja	15	15	100%	15	100%	15	100%
WBGZ	Wau	28	28	100%	28	100%	28	100%
Lakes	Rumbek Centre	23	22	96%	23	100%	23	100%
WBGZ	Jur River	35	33	94%	35	100%	35	100%
CES	Juba	46	43	93%	46	100%	46	100%
NBGZ	Aweil East	37	34	92%	36	97%	34	92%
NBGZ	Aweil South	11	10	91%	10	91%	10	91%
CES	Yei	17	15	88%	16	94%	16	94%
CES	Kajo Keji	17	15	88%	15	88%	15	88%
Lakes	Cueibet	15	13	87%	15	100%	15	100%
Lakes	Awerial	7	6	86%	7	100%	7	100%
CES	Terekeka	20	17	85%	17	85%	17	85%
Lakes	Yirol East	11	9	82%	11	100%	11	100%
NBGZ	Aweil West	27	20	74%	27	100%	27	100%
NBGZ	Aweil North	25	16	64%	23	92%	25	100%
CES	Morobo	5	3	60%	3	60%	4	80%
Lakes	Wulu	14	7	50%	14	100%	14	100%
CES	Lainya	16	5	31%	5	31%	11	69%
Lakes	Yirol West	12	0	0%	12	100%	12	100%

STATE	COUNTY	Number of reporting sites	No. of HFs Reported on Time in WK 36	Timeliness Percentage of WK 36	No. of HFs Reported regardless of time in 36	Completeness Percentage of WK 36	No. of HFs Reported regardless of time in WK 35	Completeness Percentage of WK 35
Unity	Abiemnhom	4	4	100%	4	100%	4	100%
Unity	Mayendit	12	12	100%	12	100%	12	100%
WES	Nzara	20	20	100%	20	100%	20	100%
WES	Nagero	10	10	100%	10	100%	10	100%
WES	Mundri West	21	21	100%	21	100%	21	100%
WES	Maridi	26	26	100%	26	100%	26	100%
WES	Ibba	11	11	100%	11	100%	11	100%
WES	Mundri East	19	19	100%	19	100%	19	100%
WES	Yambio	42	42	100%	42	100%	42	100%
WES	Ezo	27	27	100%	27	100%	27	100%
WES	Mvolo	11	11	100%	11	100%	11	100%
WES	Tambura	28	26	93%	28	100%	26	93%
Unity	Mayom	14	13	93%	13	93%	9	64%
Unity	Leer	11	9	82%	9	82%	7	64%
Unity	Rubkona	13	10	77%	11	85%	12	92%
Unity	Pariang	11	8	73%	10	91%	10	91%
Unity	Koch	7	3	43%	5	71%	4	57%
Unity	Panyijiar	15	5	33%	14	93%	14	93%
Unity	Guit	7	0	0%	6	86%	6	86%

IDSR timeliness & completeness performance at county level for week 36 of 2021 (2)



STATE	COUNTY	Number of reporting sites	No. of HF's Reported on Time in WK 36	Timeliness Percentage of WK 36	No. of HF's Reported regardless of time in WK 36	Completeness Percentage of WK 36	No. of HF's Reported regardless of time in WK 35	Completeness Percentage of WK 35
Jonglei	Pibor	7	7	100%	7	100%	7	100%
Jonglei	Nyiroi	10	10	100%	10	100%	7	70%
Jonglei	Pochalla	7	7	100%	7	100%	7	100%
EES	Lopa Lafon	18	18	100%	18	100%	18	100%
EES	Kapoeta South	10	10	100%	10	100%	10	100%
EES	Kapoeta North	16	15	94%	15	94%	15	94%
EES	Torit	20	18	90%	19	95%	20	100%
Jonglei	Fangak	17	15	88%	15	88%	15	88%
EES	Ikotos	27	23	85%	26	96%	27	100%
Jonglei	Duk	15	11	73%	11	73%	11	73%
Jonglei	Twic East	11	8	73%	8	73%	8	73%
Jonglei	Ayod	15	9	60%	9	60%	10	67%
Jonglei	Bor	35	21	60%	21	60%	21	60%
EES	Kapoeta East	12	7	58%	10	83%	10	83%
EES	Magwi	22	12	55%	19	86%	20	91%
EES	Budi	21	10	48%	17	81%	17	81%
Jonglei	Canal Pigi	12	3	25%	6	50%	4	33%
Jonglei	Uror	8	1	13%	1	13%	2	25%
Jonglei	Akobo	8	0	0%	0	0%	2	25%

STATE	COUNTY	Number of reporting sites	No. of HF's Reported on Time in WK 36	Timeliness Percentage of WK 36	No. of HF's Reported regardless of time in WK 36	Completeness Percentage of WK 36	No. of HF's Reported regardless of time in WK 35	Completeness Percentage of WK 35
Warrap	Gogrial West	31	31	100%	31	100%	31	100%
Warrap	Tonj East	14	14	100%	14	100%	14	100%
Warrap	Tonj North	14	14	100%	14	100%	14	100%
Warrap	Tonj South	14	14	100%	14	100%	14	100%
Upper Nile	Maiwut	5	5	100%	5	100%	5	100%
Upper Nile	Longechuk	9	8	89%	9	100%	9	100%
Warrap	Gogrial East	15	12	80%	12	80%	11	73%
Upper Nile	Melut	8	6	75%	6	75%	6	75%
Upper Nile	Fashoda	16	10	63%	10	63%	14	88%
Upper Nile	Akoka	5	3	60%	5	100%	5	100%
Upper Nile	Manyo	10	6	60%	8	80%	8	80%
Warrap	Twic	26	15	58%	15	58%	20	77%
Upper Nile	Luakpiny Nasir	12	6	50%	9	75%	10	83%
Warrap	Abyei	10	5	50%	6	60%	6	60%
Upper Nile	Ulang	14	6	43%	8	57%	7	50%
Upper Nile	Maban	17	6	35%	11	65%	11	65%
Upper Nile	Makal	7	2	29%	5	71%	5	71%
Upper Nile	Baliet	4	0	0%	4	100%	4	100%
Upper Nile	Panyikan g	3	0	0%	3	100%	3	100%
Upper Nile	Renk	11	0	0%	0	0%	0	0%



States	Number of reporting sites	Supporting Partners
WES	213	AMREF, World Vision, CUAMM, CDTY, OPEN
CES	117	HLSS, SSUHA, Healthnet TPO, IHO,GOAL,TRI-SS,THESO,IMA,SSHCO
NBGZ	133	Malaria Consortium, Health net TPO, IRC, CEDS, IHO
WBGZ	78	Cordaid, Healthnet TPO, CARE International,IOM,ALIMA
Jonglei	107	Nile Hope, MDM, JDF, Livewell, CMD, HFO, EDA, CRADA, Malaria Consortium, CMA,ACSO,MEDAIR,CARE,World Relief,UNH
EES	142	Cordaid, HLSS, CCM
Unity	94	Cordaid, UNIDOR, IRC, CHADO, CARE International, CRADA, CASS,IOM,Samaritan's Purse
Warrap	123	GOAL, CCM, WVI, Malaria Consortium, UNKEA, Save the Children, MSF
Upper Nile	112	Cordaid, WVI, RI, IMC, NIDO, UNKEA, MC, SSAID,CORDAID ,IOM,HFD,TADO
Lakes	113	Doctors with Africa (CUAMM)

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

For more help and support, please contact:

Dr. John Rumunu

Director General Preventive Health Services
Ministry of Health
Republic of South Sudan
Telephone: +211924767490
Email: ori.moiga@gmail.com

Mr. Angelo Majak Goup

A/Director, Emergency Preparedness and Response
Ministry of Health, RSS
Tell: +211929830530
Emails: majakdegoup99@gmail.com

IDSAR 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>

