



**South Sudan  
Ministry of Health**

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



**World Health  
Organization**  
South Sudan

**Epidemiological Bulletin Week 40, 2022  
(October 2-8 October)**

## Major epidemiological highlights in week 40 of 2022



- In week **40, 2022**, the IDSR reporting timeliness and completeness were **83%** and **86%** respectively while the timeliness and completeness for EWARN sites were both at **89%**
- The overall performance of IDSR and EWARN reporting sites in **week 40, 2022** is above 80% for both IDSR sites and EWARN sites
- Of the **115** alerts generated in **week 40, 2022**; **28.7%** were for malaria (33) and **13.9%** for acute watery diarrhea(19), and **5.2%** for Acute Watery Diarrhea(16)
- Confirmed outbreak of Sudan Ebolavirus in Uganda Mubende district as the epicenter with other four districts with at least a confirmed case. As of week 44, a total of 137 cases and 54 confirmed deaths giving a CFR of 39%.
- A total of 20 suspected Ebola Virus Disease (EVD) cases were reported from Nimule, Yei, Yambio, Kajo-keji, Juba, and Rubkona with samples collected from 06 samples collected and all tested negative for EVD.
- Confirmed measles outbreaks in 15 counties since the beginning of the year 2022 with the latest counties affected including Leer, Rubkona (Bentiu camp)
- Hepatitis E virus cases continue to be reported in Bentiu IDP Camp with **42** cases reported in **week 40** giving a cumulative of **3,442 cases and 26 deaths (CFR 0.75%)** reported since week 1, 2019
- On other emergencies, floods have affected over **800,000** people in **24** counties in ten states, and high cases of Acute Malnutrition in South Sudan due to **food insecurity**.

# 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 40 &



Timeliness States Ranking	States	Number of reporting sites	No. of HFs Reported on Time in WK 40	Timeliness Percentage of WK 40	No. of HFs Reported on Time in WK 39	Timeliness Percentage of WK 39
1st	Lakes	113	112	99%	111	98%
2nd	WES	218	214	98%	218	100%
3rd	NBGZ	89	80	90%	70	79%
4th	WBGZ	80	70	88%	67	84%
5th	EES	105	91	87%	94	90%
6th	Unity	95	81	85%	77	81%
6th	Jonglei	126	100	79%	89	71%
8th	Warrap	123	92	75%	96	78%
9th	CES	126	80	63%	111	88%
10th	Upper Nile	95	50	53%	61	64%
	South Sudan	1170	970	83%	994	85%

## KEY

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

- The Timeliness of IDSR Reporting (Supported by EWARS Web and Mobile) at health facility level in week 40 stands at 83% while in week 39 it was at 85% and 7 states were above the target of 80% in week 40.
- Reporting Challenges in the poorly performed States are; insecurity, internet inaccessible; Turnover of Partners.



# IDSR Completeness performance at State level for week 40 & 39 of 2022



Completeness States Ranking	States	Number of reporting sites	No. of HF's Reported regardless of time in WK 40	Completeness Percentage of WK 40	No. of HF's Reported regardless of time in WK 39	Completeness Percentage of WK 39
1st	Lakes	113	113	100%	113	100%
2nd	WES	218	218	100%	218	100%
3rd	Unity	95	91	96%	84	88%
4th	WBGZ	80	76	95%	67	84%
5th	NBGZ	89	80	90%	80	90%
6th	EES	105	92	88%	103	98%
7th	Jonglei	126	100	79%	89	71%
8th	Warrap	123	93	76%	97	79%
9th	Upper Nile	95	62	65%	76	80%
10th	CES	126	80	63%	112	89%
	<b>South Sudan</b>	<b>1170</b>	<b>1005</b>	<b>86%</b>	<b>1039</b>	<b>89%</b>

### KEY

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

- The Completeness of IDSR Reporting (Supported by EWARS Web and Mobile) at health facility level in week 40 stands at 86% while in week 39 it was 89% and 6 states were above the target of 80% in week 40.
- Reporting Challenges in the poorly performed States includes; insecurity; internet inaccessible; Turnover of Partners, Floods.



# IDSR Reporting Completeness by Counties in week 40, 2022.



- 11/80 counties did not achieve reporting target of 80%
- Melut county did not report in week 40



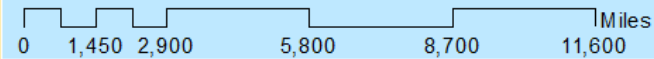
**Legend**

- 100%
- 80 - 99%
- 1 - 79%
- No Reports
- county\_boundaries
- States\_boundaries
- Africa\_boundaries

Democratic Republic of Congo

Data source: ss.ewars.ws  
24/10/2022, 10:00 AM

Kenya  
Date of Publishing: 24/10/2022  
By: Lasu Robert Martin



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# Surveillance: EWARS Timeliness performance indicator by partner for week 40 and 39 of 2022

Partner	HFs	Reporting	Performance		
PARTER	Number of reporting sites	# of reports received on Time in Week 40	Timeliness of Week 40	# of reports received on Time in Week 39	Timeliness of Week 39
Medicair	3	3	100%	3	100%
HFO	4	4	100%	4	100%
UNH	2	2	100%	2	100%
SMC	6	6	100%	6	100%
SSHCO	1	1	100%	1	100%
CIDO	1	1	100%	1	100%
IMC	24	24	100%	22	92%
MSF-H	4	4	100%	3	75%
Medair	2	2	100%	1	50%
ADA	1	1	100%	0	0%
TRI-SS	2	2	100%	0	0%
HAA	4	4	100%	0	0%
IOM	10	8	80%	10	100%
MSF-E	6	4	67%	4	67%
UNIDOR	3	2	67%	2	67%
IRC	2	1	50%	2	100%
MC	2	1	50%	2	100%
World Relief	2	0	0%	2	100%
<b>TOTAL</b>	<b>79</b>	<b>70</b>	<b>89%</b>	<b>65</b>	<b>82%</b>

The Timeliness of EWARS in partners' supported sites stands at 89% in week 40 while in week 39 it was at 82%.



# Surveillance: EWARS completeness performance indicator by partner for week 40 and 39 of 2022



Partner	HF's	Reporting	Performance		
PARTER	Number of reporting sites	# of reports received regardless of Time in Week 40	Completeness of Week 40	# of reports received regardless of Time in Week 39	Completeness of Week 39
SMC	6	6	100%	6	100%
Medicair	3	3	100%	3	100%
UNH	2	2	100%	2	100%
HFO	4	4	100%	4	100%
CIDO	1	1	100%	1	100%
SSHCO	1	1	100%	1	100%
IMC	24	24	100%	24	100%
MSF-H	4	4	100%	3	75%
Medair	2	2	100%	1	50%
ADA	1	1	100%	0	0%
TRI-SS	2	2	100%	0	0%
HAA	4	4	100%	0	0%
IOM	10	8	80%	10	100%
MSF-E	6	4	67%	4	67%
UNIDOR	3	2	67%	2	67%
IRC	2	1	50%	2	100%
MC	2	1	50%	2	100%
World Relief	2	0	0%	2	100%
<b>TOTAL</b>	79	70	89%	67	85%

The Completeness of EWARS in partners' supported sites stands at 89% in week 40 while in Week 39 it was at 85%.



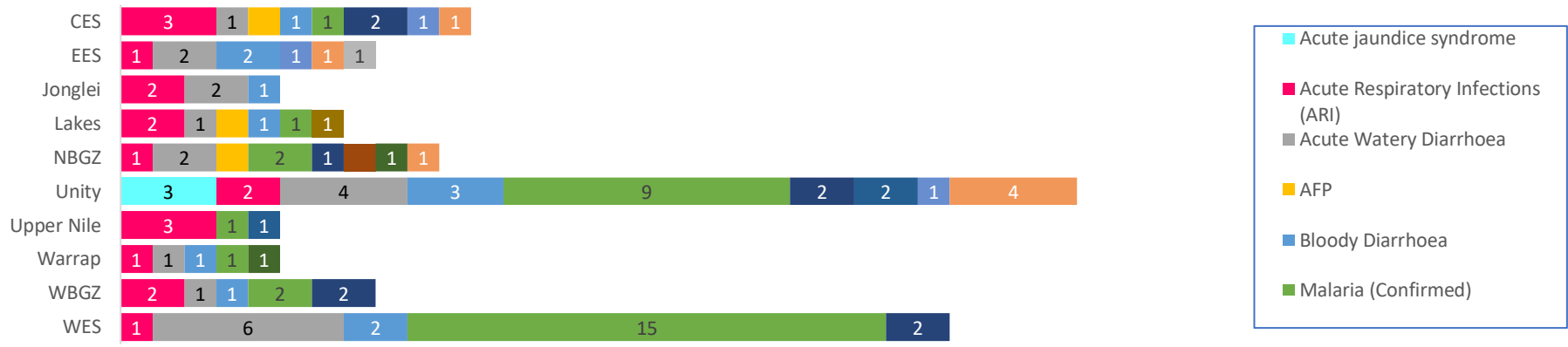
# INDICATOR-BASED SURVEILLANCE



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



# Alert by disease and States in week 40 of 2022 [ a total of events-specific alerts generated by state



## This week a total of 115 Alerts were triggered from the EWARS System:

- 3 AJS alert: these were triggered from MSF-H Leer PHCC in Leer, MSF-H Bentiu IDP Hospital, in Rubkona, Mankien PHCC in Mayom County of Unity State.
- 10 Measles alert: these were triggered from Muni PHCC in Terekeka, Nagero PHCC, Sangua II PHCU in Nzara , IMC UN House Clinic 1 in Juba, MSF-H Bentiu IDP Hospital in Rubkona, Raja Hospital, Panthou PHCC in Aweil South, MSF-H Leer PHCC, Tharkueng PHCC in Jur River,
- 3 AFP alert: this was triggered Duony PHCU in Cueibet County, Limi PHCU in Kajo-Keji County, Bakou PHCU in Aweil East,NBGZ.
- 3 Cholera alerts: from Majiok PHCU in Longechuk County, Pachak PHCU in Panyijiar County, IRC Sector 4 PHCC in Rubkona County.
- 3 EBS alerts: these are from MSF-H Leer PHCC of suspected Measles, Nimule Hospital in Magwi County **of suspected Viral Haemorrhagic Fever, Yei Hospital of suspected Viral Haemorrhagic Fever**
- 2 Guinea Worm alerts: were triggered from Tonj Hospital in Tonj South and Bakou PHCU in Aweil East.
- 1 Neonatal Tetanus alert: this was from Bakou PHCU in Aweil East,NBGZ.
- 1 PoE EVD alert: from Nimule Border in Magwi County **of suspected Viral Haemorrhagic Fever**
- 1 Relapsing Fever alert: this was from Citcok PHCC in Cueibet County of Lake State

# SUDAN EBOLAVIRUS IN UGANDA AND READINESS IN SOUTH SUDAN

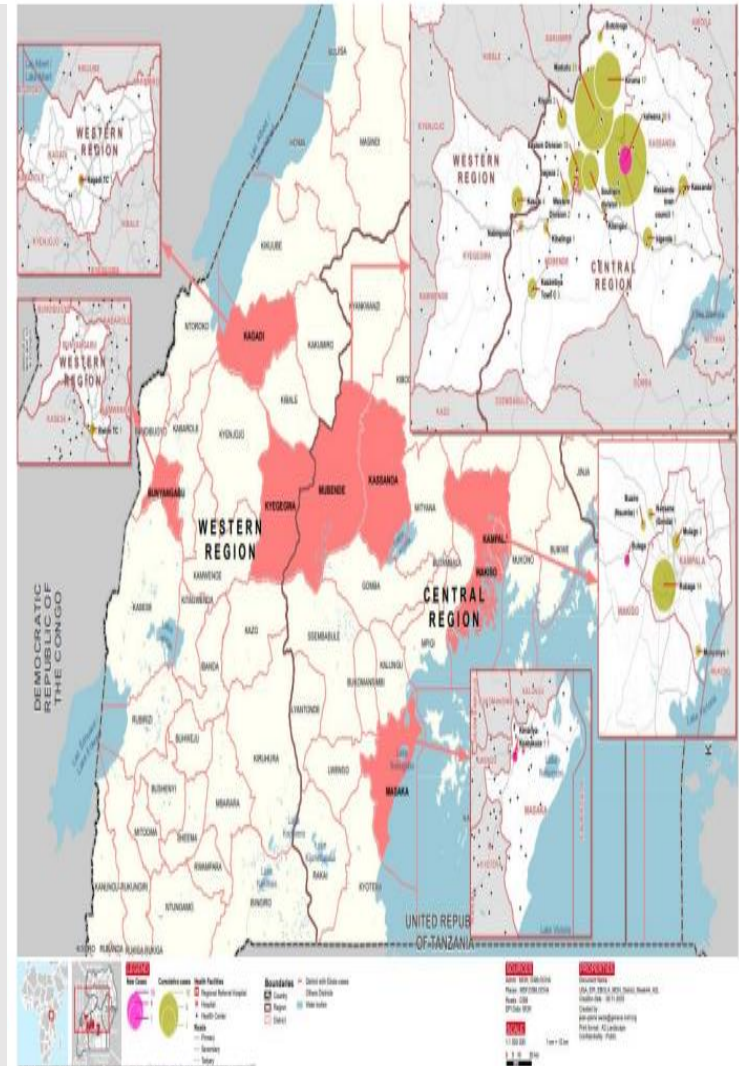


Alert management including detection; reporting; verification; risk assessment; & risk characterization

# Sudan Ebolavirus Disease in Uganda as 11 November 2022

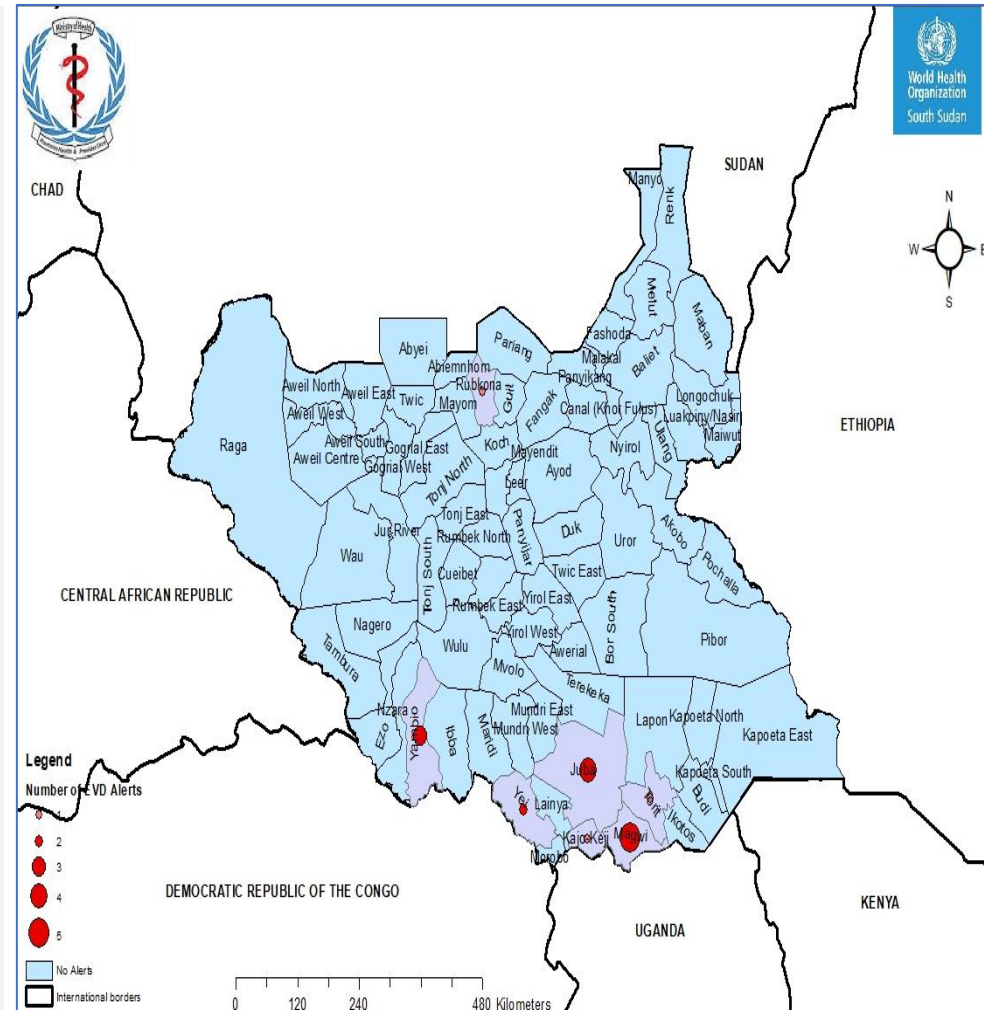


- On 20th September 2022, the Ministry of Health declared an outbreak of Sudan ebolavirus (SVD) after a case managed at Mubende Regional Referral Hospital (MRRH) in Mubende district was confirmed through testing at the Uganda Virus Research Institute (UVRI)
- November 11, 2022 marked 55 days of response to the Sudan EVD outbreak in Uganda, the first case was confirmed on 19-September 2022.
- Cumulatively there are **137 confirmed EVD cases and 54 confirmed death giving a Case Fatality Ratio (CFR) of 54/137 (39%) and a Total recovery is 65 out of the total confirmed cases**
- A total of 8 districts were affected with most cases reported from Mubende, Kassanda and Kampala.
- As of 11<sup>th</sup> November One newly confirmed EVD case – 17yr old female from Kassanda district was registered
- One new recovery from Wakiso district.
- One newly confirmed death from Mubende district and One new recovery from Wakiso district.
- A total of 1,086 contacts are actively being followed-up in eight districts, the follow-up rate in the past 24 hours was 93%.



# South Sudan's key highlights

- No EVD outbreak has been declared in South Sudan and countries neighboring Uganda
- Cumulatively, a total of 20 alerts have been reported and investigated from seven locations in the country since September 2022:
- Latest alert was reported on 08 November 2022 from Nimule
- Of the 20 alerts, 14 were discarded as they did not meet the case definition
- Number of alerts discarded
- Nimule (6), Juba (4), Yambio (3), Yei (2), Kajo-keji (3) Torit (1), Rubkona (2)
- Six alerts had samples collected and all 06 tested negative by PCR for EVD in both Sudan and Zaire strains



Geographical Distribution of EVD alerts detected and investigated as of 6<sup>th</sup> November 2022

# Key actions taken by pillar in SSD

## 1. Coordination

- The IMS has been activated and the PHEOC is in preparedness/alert mode.
- Sub-national taskforces activated in high-risk areas (e.g., the County Taskforce in Nimule has been established and functional as of 27 September 2022.
- COVID-19 coordination structures leveraged for EVD preparedness and response.

## 2. Surveillance and laboratory

- Review of critical EVD tools (standard case definition, case investigation form, SOPs, etc.) has been finalized.
- RRTs have been deployed to high-risk locations and screening at the Nimule point of entry has been reactivated.
- Ongoing orientation for healthcare workers in high-risk areas on EVD case definition for early case detection and identification.
- 21 standby contact tracers were oriented in Juba
- There is an in-country testing capacity for Sudan Ebola Virus as well as the EVD Zaire strain though not adequate



# Key actions taken by pillar in SSD



## 3. Risk communication, social mobilization, and community engagement

- IEC materials have been adapted, printed for distribution

## 4. Infection prevention and control

- IPC trainings conducted in Juba Teaching Hospital, Nimule and Yambio for clinical, laboratory, and surveillance teams.

## 5. Case management

- Assessment and gap analysis of three EVD isolation facilities conducted in Yambio, Yei, and Nimule.
- Isolation facilities in Juba, Nimule, and Yei have been set up by MoH with support from WHO
- Triage and screening have commenced at the Juba Teaching Hospital entrance
- Orientation of (22 Health care workers from 8 health facilities including private health facilities from the outskirts of Juba on EVD triaging, case detection, basic infection prevention and control



# EVENT-BASED SURVEILLANCE



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



# Updates on Floods situation in South Sudan



- Flooding declared a national emergency by the Govt-10 Sept 2022
- Flooding has affected 24 counties in 8 states
  - Upper Nile-all 12 counties-no Initial Rapid Needs Assessment (IRNA) data received
  - Warrap-5 counties-399709 people affected (IRNA data for TS, GGW, GGE, Twic only)
  - Northern Bahr el Ghazal-All five counties-388758 people affected (IRNA data)
  - WES-66671 people affected in Mvolo, Mundri East and Mundri West (IRNA data)
  - WBeG-Jur River-14986 people affected
  - Lakes-Cueibet-68988 people affected
  - Unity-Leer, Mayendith and Mayom-no IRNA data;
  - Jonglei-IRNA done in Fangak



# Floods Situation in South Sudan



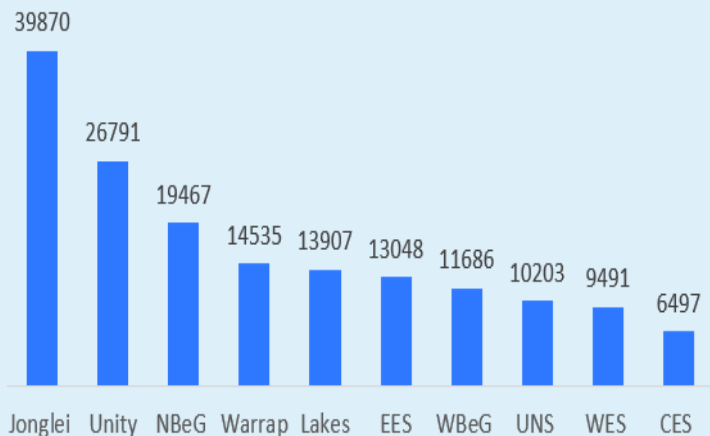
State	County	# people affected	Deaths	Snake bites	# HFAs affected	# people displaced
Lakes	Cueibet	68988	0	32	0	15012
WBeG	Jur River	14986	13	16		
NBeG	AWC	22290	0	23		3432
	AWN	84246	9	0	10	25272
	AWS	45246	0	2		3774
	AWE	135030	6	5		66858
	AWW	101946	1	0	10	25758
			388758	16	30	20
Warrap	Gogrial East	90283	7	4	11	
	Gogrial West	133584	0	0	0	
	Tonj North	91584	0	0	0	
	Mvolo	31959				
	Mundri East	12516				
WES	Mundri West	22196				
		66671	0	0	0	
Upper Nile	Longechuk	10808	0	23	3	
	Maban	268526	3	0	4	
	Maiwut	38668	0	0	0	
		318002	3	23	7	
Jonglei	Fangak	17669				
Unity	Koch	74838				
	Leer	49000				
	Mayendith	59356				
	Mayom	3000				



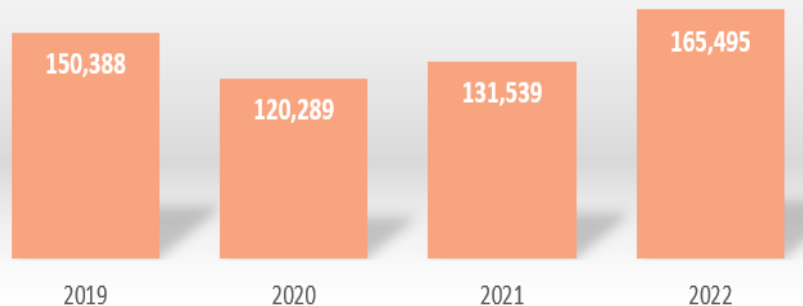
# Food insecurity and Acute Malnutrition in South Sudan Jan to July 2022



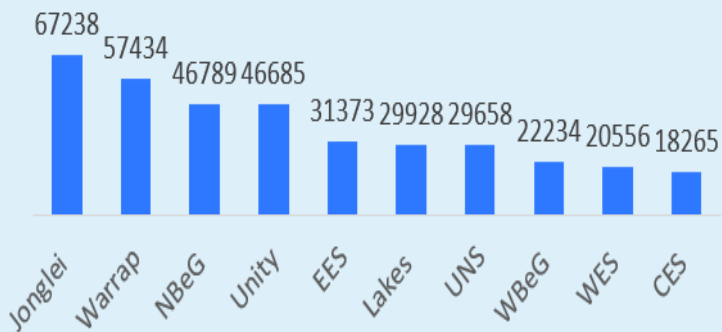
SAM New admission (Jan-July 2022)



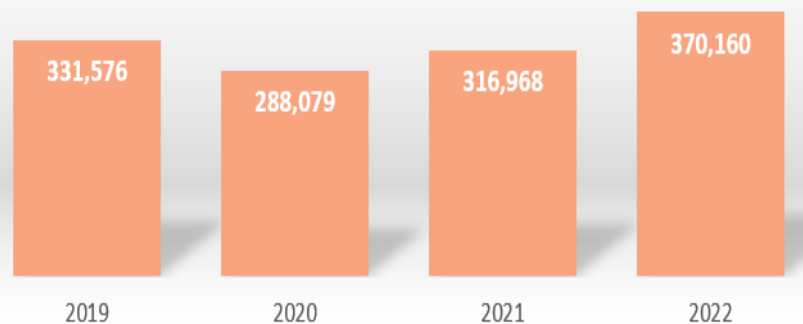
Trend of SAM admission (Jan-July 2019-2022)



MAM New admission (Jan-July 2022)

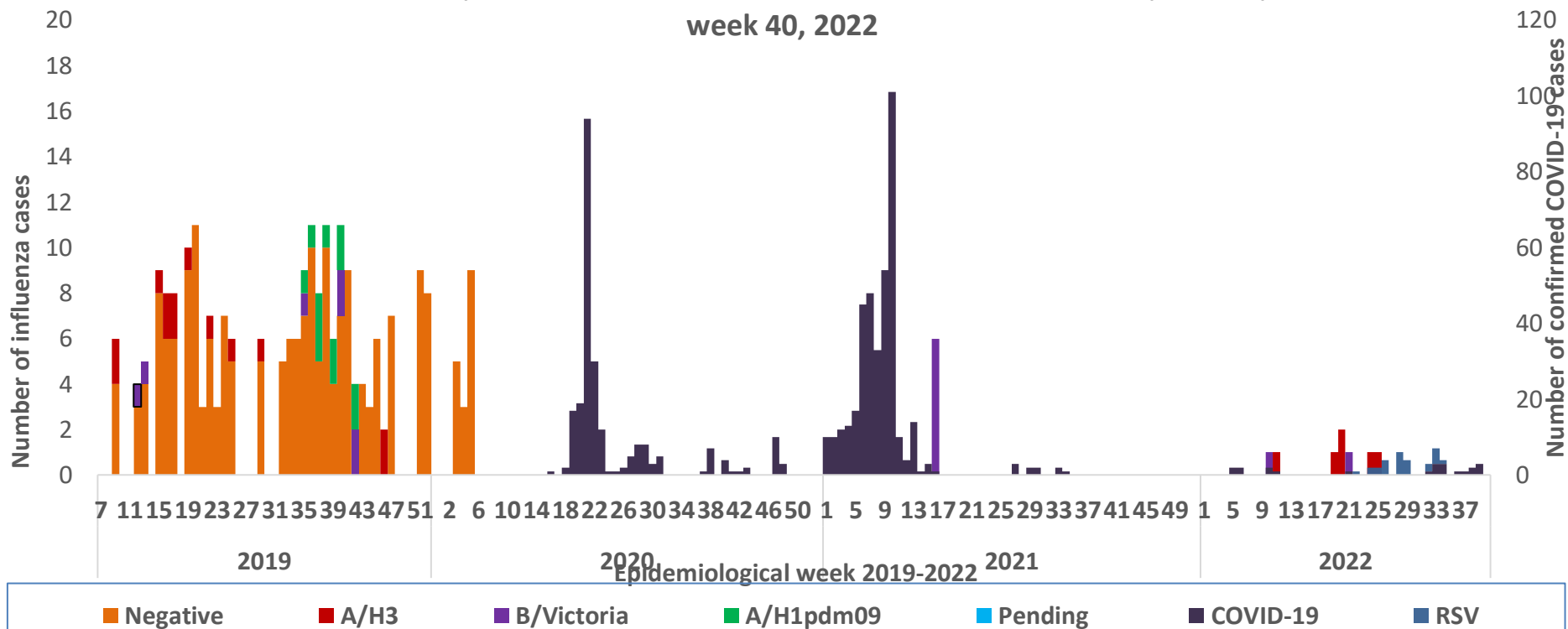


Trend of MAM admission (Jan-July 2019-2022)





Confirmed Influenza ,COVID-19 and RSV cases from sentinel sites in Juba, week 7, 2019 to week 40, 2022



- There are currently Four designated Influenza sentinel surveillance sites in Juba (Juba Teaching Hospital and Al Sabah Children’s Hospital Rumbek State Hospital & Juba Military Hospital) that are collecting epidemiological data and samples from ILI/SARI cases.
- By the end of wk. 52 of 2021, a total of 266 ILI/SARI samples have been collected and tested in NPHL, 257 being negative; 6(2%) positive for Influenza B (Victoria); 3 (1%) positive for Influenza A (H3) and zero(0%) positive for Influenza A (H1)pdm09.
- From week 1-to 40,2022; a total of 470 ILI/SARI samples were collected,416 samples tested negative, and Cumulatively, 20 tested positive for covid-19,1 positive for Influenza B (Victoria), and 5 positive for influenza A(H3). 26 RSV was confirmed in Week 40

# **ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS**

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

## Response| Summary of major ongoing outbreaks in 2022

Aetiological agent	Location (county/ state)	Date first reported	New cases since last bulletin	Cumulative cases to date (attack rate %)	Interventions			
					Case management	Vaccination	Health promotion	IPC/W ASH
<b>Ongoing epidemics</b>								
<b>Hepatitis E</b>	Bentiu PoC	03/01/2019	17	3,548(0.82%)	Yes	yes	Yes	Yes
<b>COVID-19</b>	35 counties	05/4/2020	11	18,054 (0.77%)	yes	yes	yes	yes
<b>Cholera</b>	Bentiu	20/3/2022	00	424 (0.0)	yes	yes	yes	yes
<b>Measles</b>	Aweil West	11/5/2022	<b>4</b>	65(0.030)	Yes	yes	Yes	NA
<b>Measles</b>	Aweil East	12/3/2022	8	60(0.013)	Yes	yes	Yes	NA
<b>Measles</b>	Aweil Center	24/4/2022	<b>4</b>	31(0.32)	Yes	yes	Yes	NA
<b>Measles</b>	Juba	19/7/2022	26	57(0.66)	yes	yes	yes	NA
<b>Anthrax</b>	<b>Gogrial west</b>	NR	3	131 (		Yes Partial in animals	yes	yes
<b>measles</b>	<b>Malakal</b>			19	yes	yes	yes	yes
<b>Measles</b>	<b>Terekeka</b>			9	yes	yes	yes	yes
<b>Measles</b>	<b>Leer</b>			10	yes	planned	yes	yes
<b>Measles</b>	<b>Bentiu (Rubkona)</b>			17	yes	planned	yes	yes
<b>Measles</b>	<b>Bor South</b>			NR	yes	Not yet	yes	yes
<b>Measles</b>	<b>Raja</b>	NR		14 (0.10)	Yes	No		yes
<b>Measles</b>	<b>Juba</b>			285	yes	yes	<b>yes</b>	yes

# Measles Cases in South Sudan 2021 and 2022

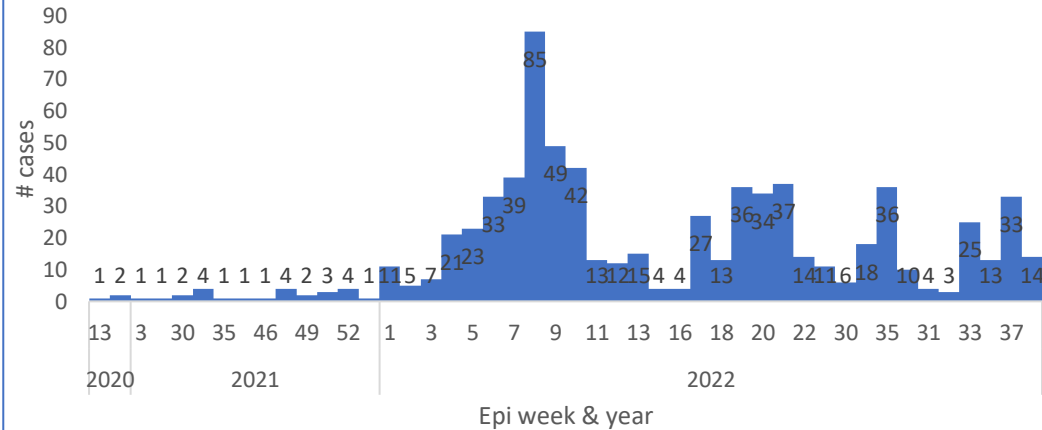
## Descriptive Epidemiology

- A total of 728 cases, and two deaths (CFR, 0.3%) were reported from (19/80) counties since 2021 and 2022
- However, measles outbreaks were confirmed in 15 counties since the beginning of the year 2022
- Highest number of cases were reported from Juba (162) and Maban (161) counties
- Current active outbreaks in three counties-Juba, Malakal, and recently Terekeka
- The surge in measles transmission is related to the accumulation of susceptible children due to low routine vaccination coverage in the country.

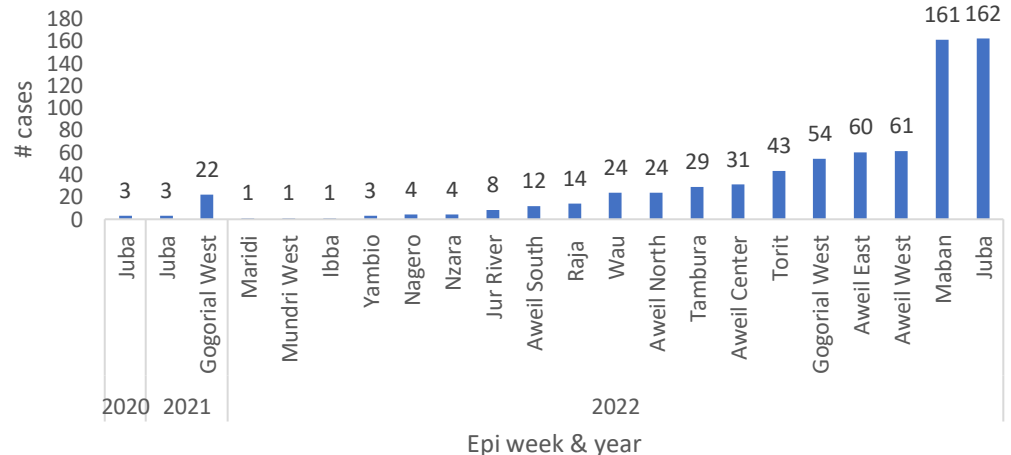
## Public Health Response

- Measles reactive vaccination campaigns have been implemented in Maban, Torit, Tambura, Raja, Aweil East, Aweil West, Aweil Centre, Aweil North, Aweil South, and Juba (5 payams), Malakal.
- Plans are underway to conduct a vaccination campaign in Terekeka County, Leer and Bentiu Camp Rubkona County.
- Reactive vaccination campaigns have been conducted underway in Juba and Malakal
- Measles risk assessment was conducted, and a response plan was developed.
- Nationwide catchup campaign planned to take place in April 2023

Epi Curve showing Measles cases in south Sudan by Epi week in 2021 and 2022.



Epi Curve showing Measles cases in south Sudan by Epi week in 2021 and 2022.

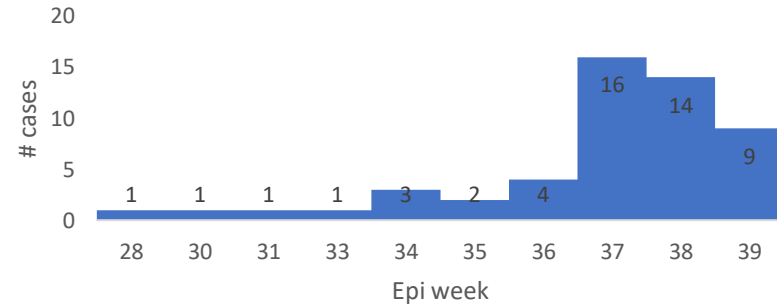


# Measles cases reported from Malakal County of Upper Nile State

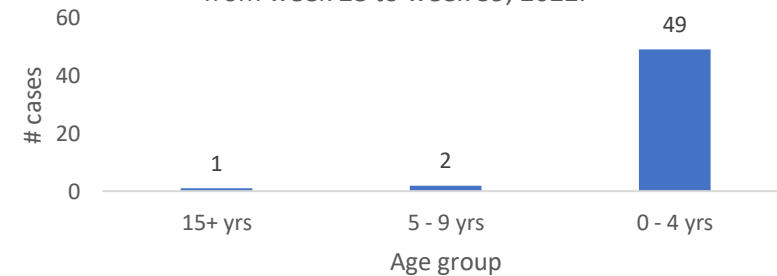
## Descriptive

- Total of 52 cases reported from Malakal between week 28 and week 39, 2022.
- Peak of cases reported in week 37 with
- Majority of the cases (94%) were reported in children less than 5 years of age
- (50%) males and (50%) females
- 41.9% (17 cases) of the cases were admitted for inpatient management; with no deaths reported so far.
- **Ongoing response**
- Active case search and line listing of cases are ongoing, and cases have been referred to the health facilities.
- Cases are being managed in different health facilities; this includes the provision of supportive management, vitamin A supplementation, and treatment of secondary infections
- Reactive vaccination campaigns conducted in affected payams by, conducted by partners
- Refresher training on measles surveillance and treatment is planned for state RRTs and frontline health workers
- Efforts underway to strengthen routine immunization services

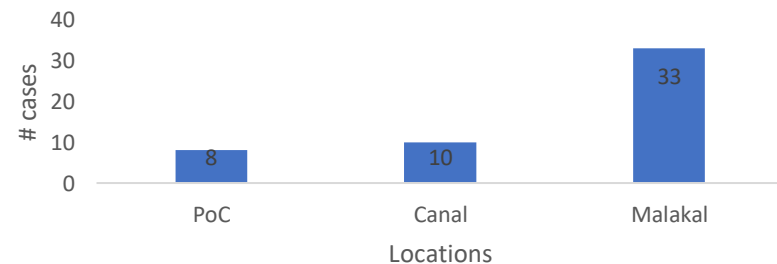
Epi Curve showing measles cases in Malakal county from week 28 to week 39, 2022.



Bar graph showing measles cases in Malakal county from week 28 to week 39, 2022.



Bar graph showing measles cases in Malakal county from week 28 to week 39, 2022.





# Confirmed Measles Outbreak in Juba County- CES

Epi Curve showing Measles cases in Juba County week 41, 2022.

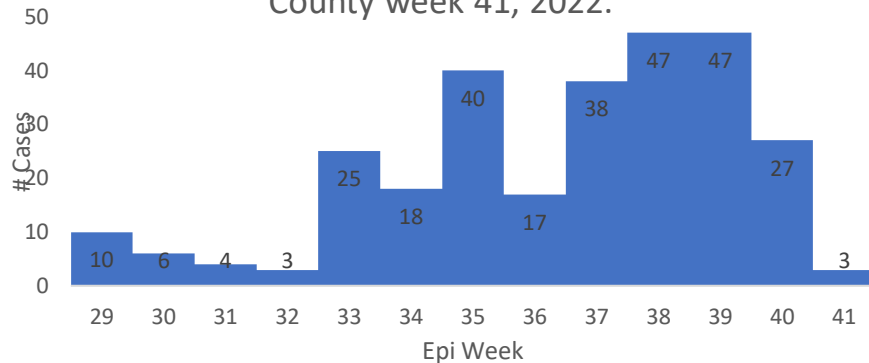


Chart showing Measles cases in Juba County by Age Group week 41, 2022.

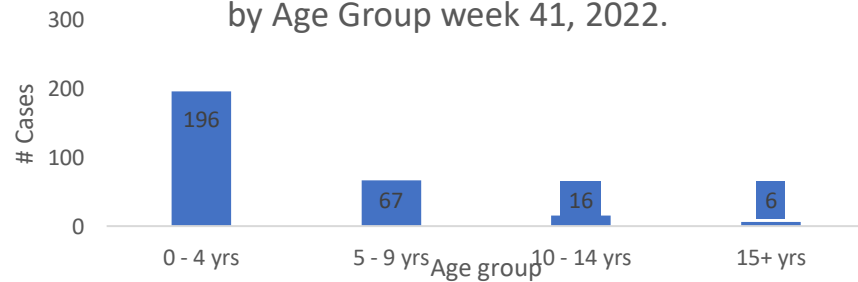
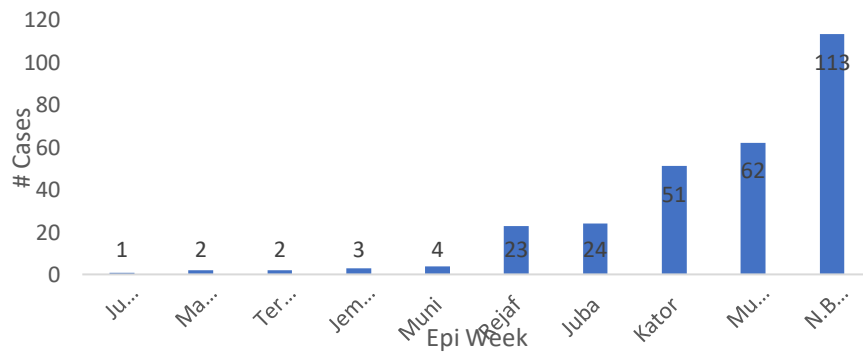


Chart showing Measles cases in Juba County by Payam week 41, 2022.



## Descriptive

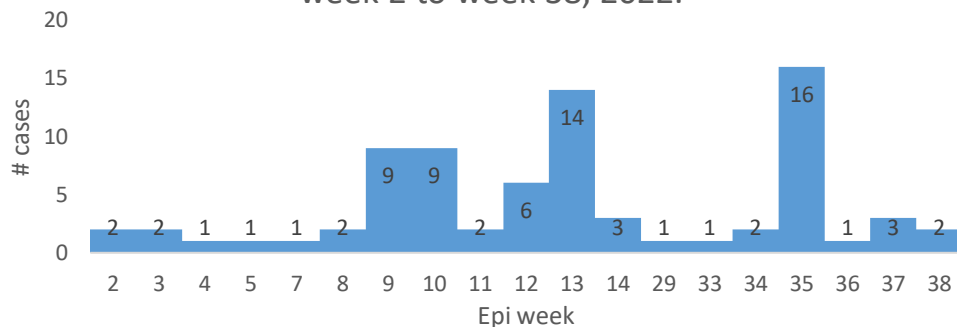
- Suspected measles cases started on 14/ 07/ 2022 in Juba County
- A total of **285** suspected cases of measles have been reported from week 29 to week 41
- More than half of the cases were reported from northern Bari payam, then Munuki and Kator Payam has the most cases (32%) among the five affected payams.
- More than half of the cases (53%) are in ages less than 5 years of age
- (62%) of the cases are males and 38%, females
- 41.9% (17 cases) of the cases were admitted for inpatient management; with no deaths reported so far.

## Ongoing response

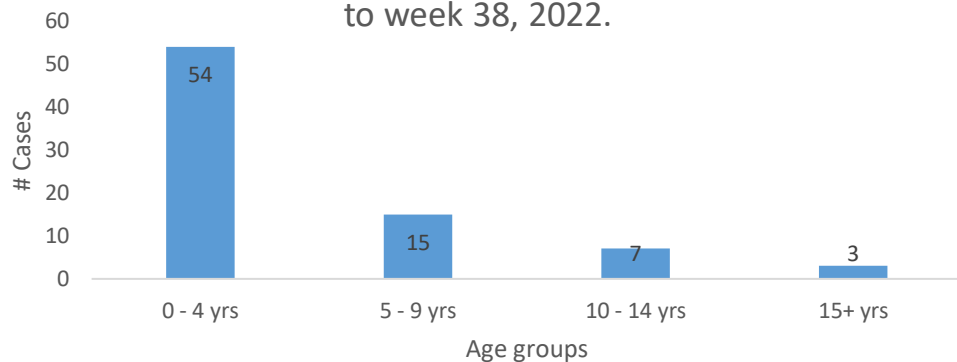
- Active case search and line listing of cases are ongoing, and cases have been referred to the nearest health facilities.
- Cases are being managed in different health facilities; this includes the provision of supportive management, vitamin A supplementation, and treatment of secondary infections
- Reactive vaccination campaigns conducted in five affected payams by MEDAIR, IOM, and WHO are leading the campaign.
- Refresher training on measles surveillance and treatment is planned for state RRTs and frontline health workers
- Routine immunization services need to be strengthened

# Measles Cases Western Bahr el Ghazal State

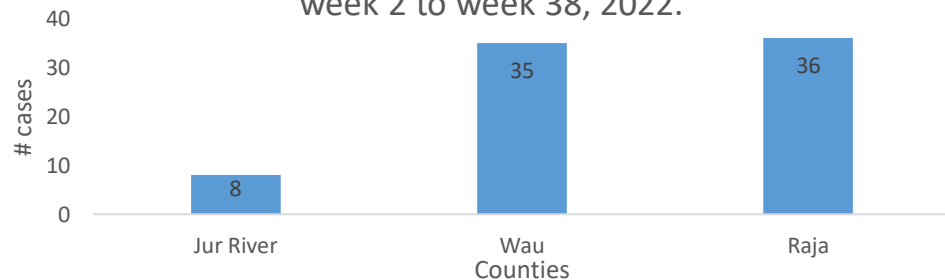
Epi curve showing measles cases in WBeG from week 2 to week 38, 2022.



Bar graph for measles cases in WBeG from week 2 to week 38, 2022.



A Bar graph showing measles cases in WBeG from week 2 to week 38, 2022.



## Descriptive Epidemiology

- Total of 79 measles cases were reported from Raja, Wau, and Jur river counties of WBeG state. No deaths were recorded.
- More than half (68%) of the cases affected age group is 0 – 4 years
- Majority of the cases reported were from Wau and Raja which had an outbreak in May and June 2022
- Of all the cases, females constituted 59% and males 41% of the total cases.
- In the Last four weeks Raja reported (14 cases) and Wau reported (8 cases)
- Jur River only reported 08 cases in weeks 9 and 10, 2022

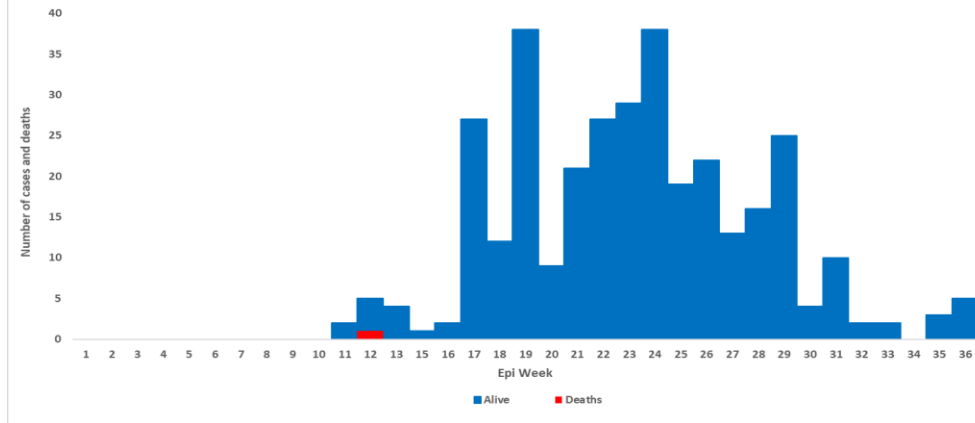
## Public health response

- Active case search and line listing of cases are ongoing, and cases have been referred to the health facilities.
- Cases are being managed in different health facilities; this includes the provision of supportive management, vitamin A supplementation, and treatment of secondary infections
- Reactive vaccination campaigns conducted in affected payams for Raja county targeted age 6 months to 59 months with 70.7% coverage
- Health Education and investigations were conducted in schools and other affected areas in Wau
- Efforts underway to strengthen routine immunization services in Wau

## Descriptive epidemiology

- *V. cholerae* case confirmed on 14 Apr 2022 in Bentiu.
- **337** cholera cases have been reported, (56 were cholera RDT positive with 30 testing culture positives)
- One of the RDT positive cases died giving 0.3% case fatality rate
- Majority (**110**) giving 32.6% was reported in June, while 105 (31.2%) were reported in May
- Gradual reduction in reported cases is being observed from week 25 up to week 35, however, this must be interpreted with caution due to inadequate surveillance across hotspot counties
- Overall, patients between 0 - 4yrs old are mostly affected with **109 (32.3%)** of the 337 cases reported
- Majority of the cases were females accounting for **209 (62.0%)** and males accounted for **128 (38.0%)**
- Vaccinated cases accounted for **118 (35.0 %)**, unvaccinated accounted for **147 (43.6%)** and **72 (21.4%)** have unknown vaccination status, thus making the total cases unvaccinated **65.0%** of the total cases;

Epidemiological Curve showing cases and death per week (Week 1-36, 2022)



Number of cholera cases by sex age group

Age Group	Female		Male		Total	
	cases	%	Cases	%	Cases	%
0-4 yrs	49	14.5	60	17.8	109	32.3
5-9 yrs	14	4.2	9	2.7	23	6.8
10-14 yrs	24	7.1	16	4.7	40	11.9
15-19 yrs	20	5.9	4	1.2	24	7.1
20-49 yrs	77	22.8	23	6.8	100	29.7
≥50 yrs	25	7.4	16	4.7	41	12.2
<b>Total</b>	<b>209</b>	<b>62.0</b>	<b>128</b>	<b>38.0</b>	<b>337</b>	<b>100.0</b>

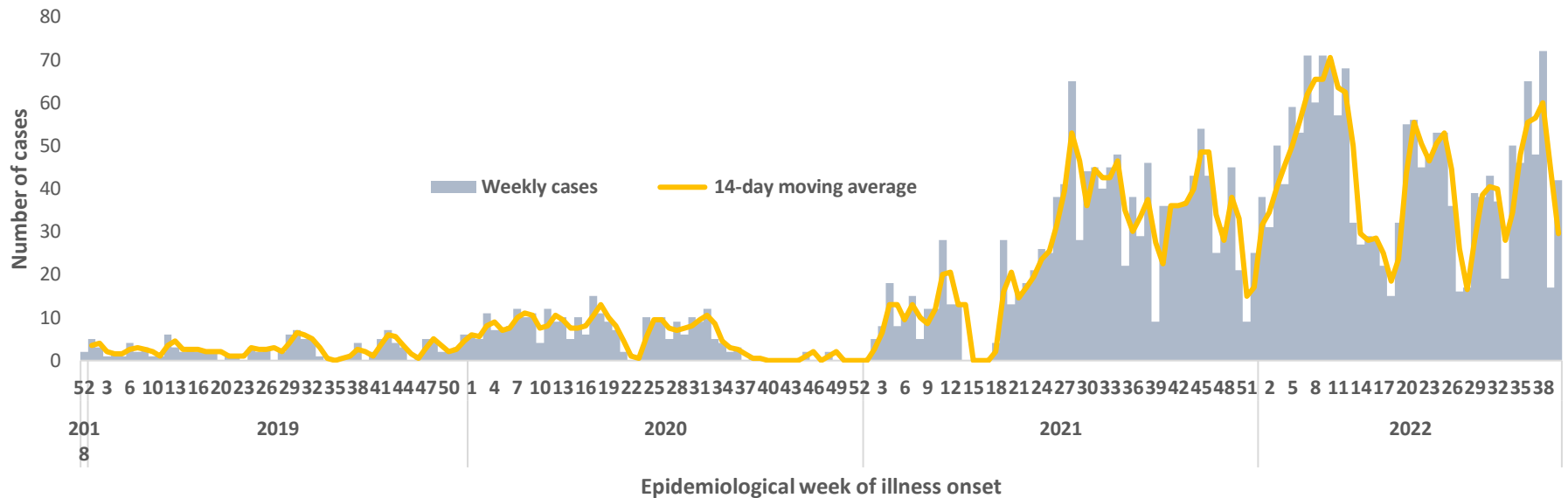




S/ N	LOCATION	TARGET	POPULATION VACCINATED		COVERAGE	
			1st round	2nd Round	1st round	2nd Round
1	Rubkona Phase 1	202,627	173,170	175,044	85%	86%
2	Rubkona Phase 2	31,680	25,196	32,075	80%	101%
3	Leer	75,333	64,033	35,375	85%	47%
4	Juba	633,335	400,584		63%	
5	Yirol East	118,163	111,499		94.4%	

- A total of 1,181,750 doses of OCV have been received in South Sudan in 2022
- 1,016,976 OCV doses have been administered
- Intra Action Review meeting planned to take place in Bentiu to review the current response; and address weaknesses
- OCV campaigns in other locations are being planned by SMOH in collaboration with partners

## Hepatitis E Virus [HEV] cases in Bentiu IDP camp, wk 1, 2019 to wk 40, 2022



## Descriptive epidemiology

- The persistent transmission of HEV in the Bentiu IDP camp continues with **3,442** cases since the beginning of 2019
- **42 AJS new** cases with (zero deaths) were reported in week 39, bringing the cumulative cases to 3,400 (26 deaths) since the onset of the outbreak in 2018.
- **HEV transmission has reduced from a peak of 60 cases every fortnight by week 8, 2021 to 42 cases every fortnight by week 40, 2022.**
- All the cases have been managed as outpatient cases except for seven cases that were admitted
- No death was reported in 2022
- 46% are female and 54% are male. Within the IDP camp, the sector-specific attack rates for HEV disease for the period week 1, 2022 are highest in sectors 3 and 5.



## **HEV response update**

1. Multisectoral joint cholera and HEV response coordination at the state level; biweekly coordination forum comprising health, WASH, and other clusters
2. Surveillance enhanced through the provision of refresher training, distribution of case definition, and other reporting tools
3. Weekly analytics of the outbreak data to monitor trends and inform decision making
4. Case management for symptomatic cases provided by the PHCCs; severe cases are referred to MSP PoC Hospital
5. The HEV vaccination campaign was conducted in Bentiu IDP Camp; the first round with a coverage of 91% and the second round with a coverage of 82% among those aged 16-40 years (incl. pregnant women); the third round is expected to be conducted in October 2022
6. Risk communication and awareness are enhanced through household health promoters/hygiene promoters; radio talk shows and messaging. Cholera and HEV messages were disseminated.
7. Enhanced access to safe drinking water, sanitation facilities such as latrines, mass clean-up campaigns, regular water quality testing, and monitoring

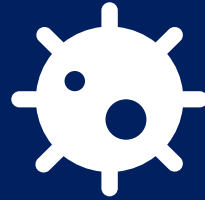
## **HEV response challenges**

1. Lack of long-term investment to improve the WASH situation in the camp
2. Lack of meaningful behavioral changes among the population
3. Frequent population movements between the IDP and host communities; the host community was not vaccinated
4. Upcoming flooding season will likely worsen the WASH situation





# COVID-19 UPDATES

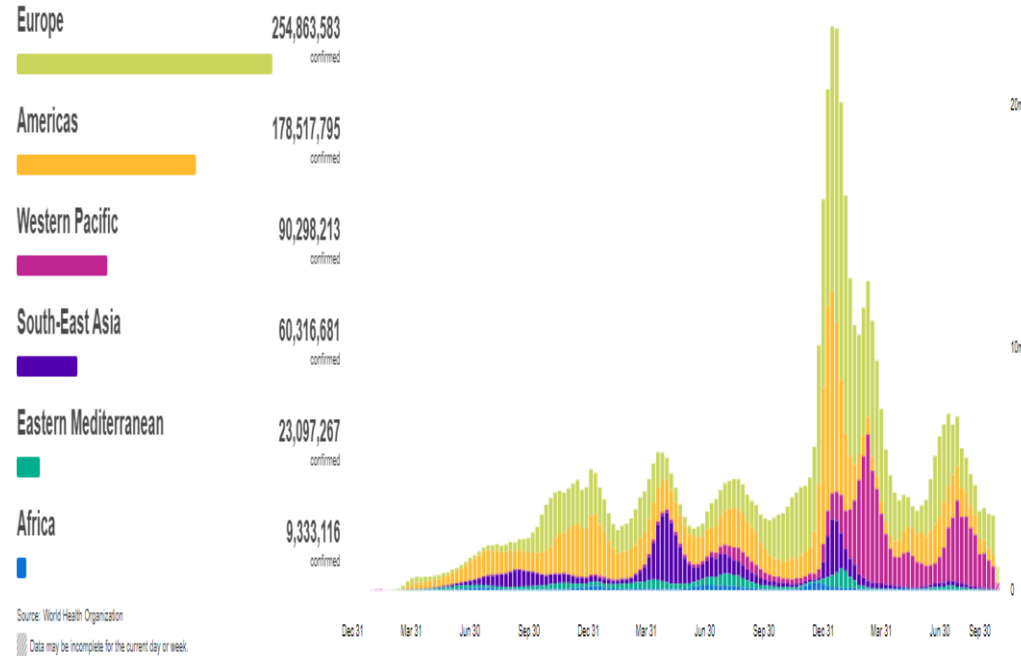






## Situation update as of 11, Nov 2022

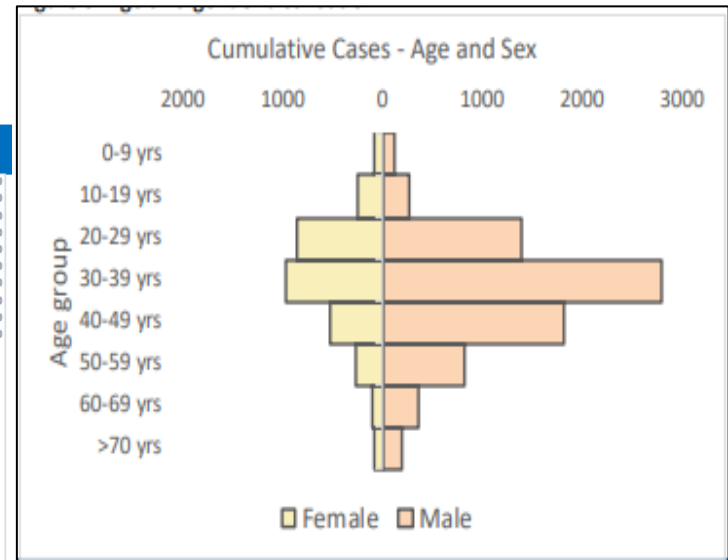
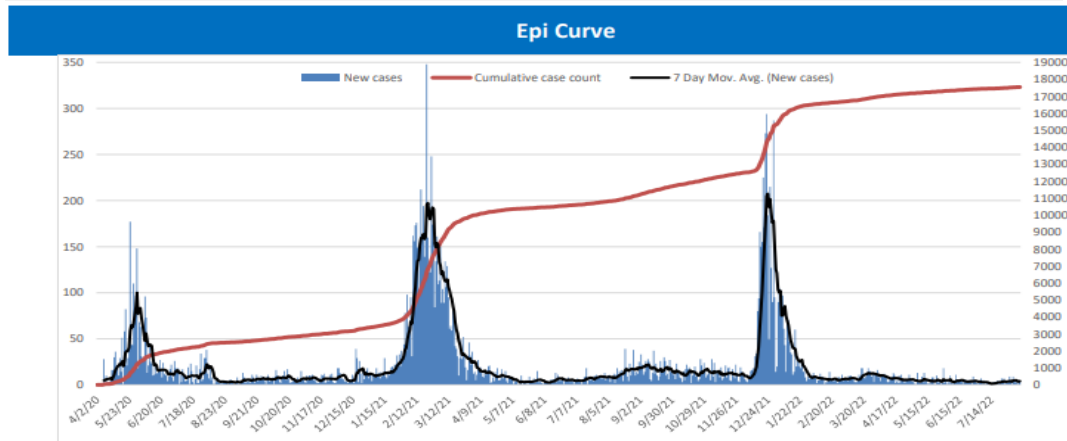
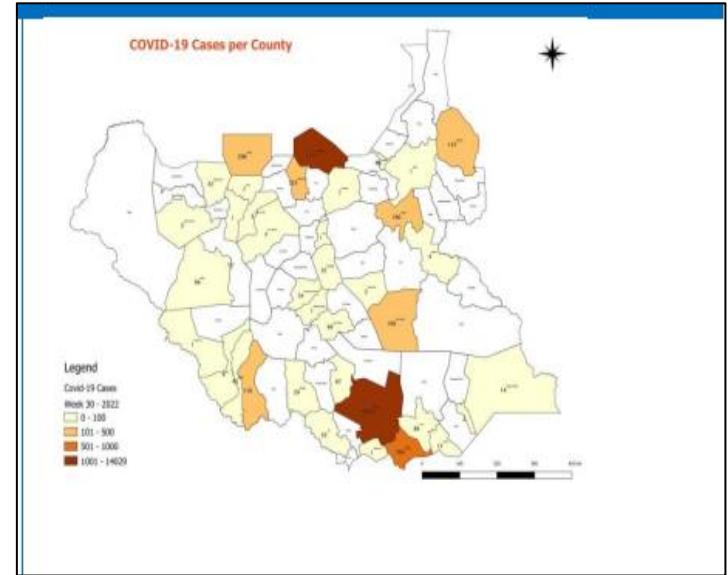
- Globally, as 11 November 2022, there have been 630,832,131 confirmed cases of COVID-19, including 6,584,104 deaths, reported to WHO. As of 8 November 2022, a total of 12,885,748,541 vaccine doses have been administered.**
- In Africa, as of 11 November 2022 there have been 9,372,324 confirmed cases of COVID-19, including 174,803 deaths reported to the WHO**



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



- **18,054** confirmed cases with **138 deaths**, **17,700** recoveries, and **216 active** cases 0.76% case fatality rate (CFR) 293 healthcare workers were confirmed as cases –
- **35 new** confirmed cases during the week with pre-travel screening (**74.3%**) and alerts (**25.7%**) accounting for all the cases –
- **572** imported cases (0 new cases this week) mostly from South Sudanese returnees (**391**), Uganda (55), and Kenya (22) –
- Seven-day moving averages for case count and positivity rate were **5.0 cases** and **1.2%** at the end of Week 32 compared to **3.4 cases** and **0.7%** at the end of Week 36 respectively
- **2,395** in-bound travelers tested at JIA to date (9 tested positive, a yield of 0.4%)





**OVERALL  
CONCLUSIONS AND  
RECOMMENDATIONS**

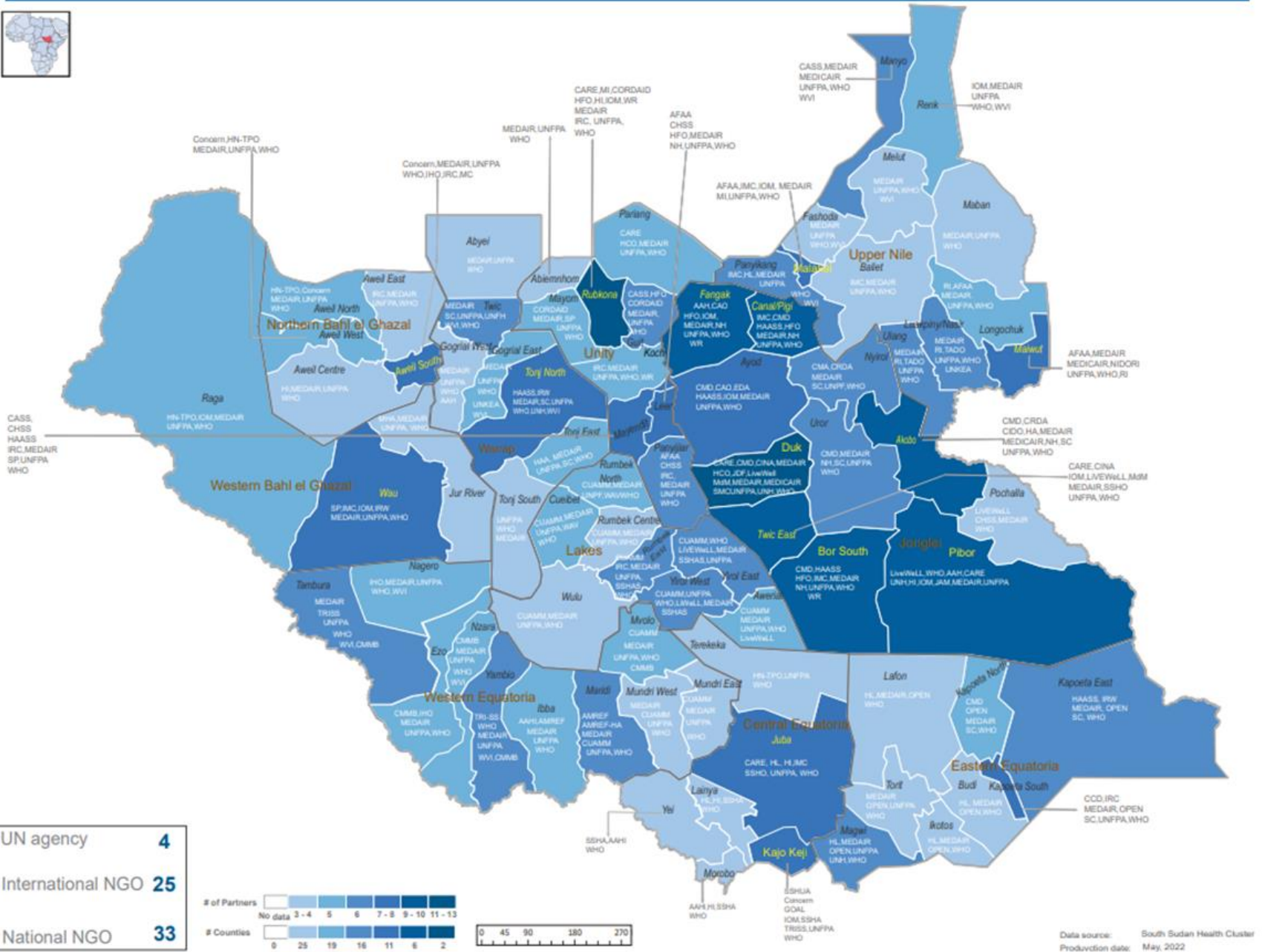
# Conclusions

- The overall performance of IDSR and EWARN reporting sites in week 40, 2022 is above 80% for both IDSR sites and EWARN sites
- Confirmed outbreak of Sudan Ebolavirus in Uganda Mubende district as the epicenter with other four districts with at least a confirmed case. As of week 44, a total of 137 cases and 54 confirmed deaths giving a CFR of 39%.
- A total of 20 suspected Ebola Virus Disease (EVD) cases were reported from Nimule, Yei, Yambio, Kajo-keji, Juba, and Rubkona with samples collected from 06 samples collected and all tested negative for EVD.
- Confirmed measles outbreaks in 15 counties since the beginning of the year 2022 with the latest counties affected including Leer, Rubkona (Bentiu camp)
- Hepatitis E virus cases continue to be reported in Bentiu IDP Camp with 42 cases reported in week 40 giving a cumulative of **3,442** cases and **25** deaths (CFR **0.76%**) reported since week 1, 2019

# Recommendations

- Partners to continue supporting County Health Departments (CHD) & State Ministries of Health on timely IDSR/EWARN reporting
- Health facilities to conduct an initial investigation on suspected cases of epidemic-prone diseases and collect samples
- Strengthen EVD surveillance, Infection Prevention and Control (IPC) and Risk communication and community engagement (RCCE) in high-risk areas of Juba, Yei, Yambio, Kaya, Nimule and Kako-keji
- Conduct reactive measles vaccination campaign in counties with confirmed outbreaks and advocate for enhanced routine immunization through PIRI
- Support the multicluster HEV response strategy in the Bentiu IDP camp and the ongoing cholera outbreak

# South Sudan Health Cluster HRP Partners 2022







# IDSr timeliness & completeness performance at county level for week 40 and 39 of 2021 (2)



STATE	COUNTY	Number of reporting sites	No. of HF's Reported on Time in WK 40	Timeliness Percentage of WK 40	No. of HF's Reported regardless of time in WK 40	Completeness Percentage of WK 40	No. of HF's Reported regardless of time in WK 39	Completeness Percentage of WK 39	STATE	COUNTY	Number of reporting sites	No. of HF's Reported on Time in WK 40	Timeliness Percentage of WK 40	No. of HF's Reported regardless of time in WK 40	Completeness Percentage of WK 40	No. of HF's Reported regardless of time in WK 39	Completeness Percentage of WK 39
Jonglei	Pochalla	7	7	100%	7	100%	7	100%	Warrap	Tonj East	12	12	100%	12	100%	12	100%
EES	Lopa Lafon	15	15	100%	15	100%	15	100%	Warrap	Tonj South	12	12	100%	12	100%	12	100%
EES	Torit	11	11	100%	11	100%	11	100%	Upper Nile	Baliet	4	4	100%	4	100%	4	100%
EES	Kapoeta East	7	7	100%	7	100%	7	100%	Upper Nile	Akoka	5	5	100%	5	100%	5	100%
EES	Kapoeta North	10	10	100%	10	100%	10	100%	Upper Nile	Longechuk	9	8	89%	9	100%	9	100%
EES	Budi	17	16	94%	16	94%	16	94%	Warrap	Gogrial West	31	27	87%	28	90%	29	94%
EES	Kapoeta South	9	8	89%	9	100%	9	100%	Warrap	Tonj North	19	14	74%	14	74%	15	79%
Jonglei	Duk	15	13	87%	13	87%	13	87%	Upper Nile	Makal	7	5	71%	5	71%	5	71%
Jonglei	Fangak	19	16	84%	16	84%	14	74%	Upper Nile	Panyikang	3	2	67%	2	67%	2	67%
Jonglei	Canal Pigi	12	10	83%	10	83%	6	50%	Warrap	Abyei	9	5	56%	5	56%	5	56%
Jonglei	Nyirrol	10	8	80%	8	80%	7	70%	Upper Nile	Renk	11	6	55%	6	55%	6	55%
Jonglei	Ayod	15	12	80%	12	80%	6	40%	Warrap	Twic	26	14	54%	14	54%	17	65%
EES	Ikotos	19	14	74%	14	74%	18	95%	Warrap	Gogrial East	15	8	53%	8	53%	7	47%
Jonglei	Twic East	11	7	64%	7	64%	9	82%	Upper Nile	Fashoda	16	7	44%	8	50%	11	69%
EES	Magwi	17	10	59%	10	59%	17	100%	Upper Nile	Maban	17	6	35%	6	35%	8	47%
Jonglei	Pibor	7	4	57%	4	57%	4	57%	Upper Nile	Ulang	14	4	29%	5	36%	10	71%
Jonglei	Bor	35	18	51%	18	51%	19	54%	Upper Nile	Manyo	11	2	18%	2	18%	5	45%
Jonglei	Akobo	14	4	29%	4	29%	4	29%	Upper Nile	Luakpiny Nasir	12	1	8%	6	50%	7	58%
Jonglei	Uror	8	1	13%	1	13%	0	0%	Upper Nile	Maiwut	5	0	0%	4	80%	4	80%
									Upper Nile	Melut	8	0	0%	0	0%	0	0%



**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 2022 use the link below:**

**<https://www.afro.who.int/publications/south-sudan-weekly-disease-surveillance-bulletin-2022>**

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

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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>

