



**South Sudan
Ministry of Health**

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



**World Health
Organization**
South Sudan

**Epidemiological Bulletin Week 21, 2023
(22- 28 May)**



Major epidemiological highlights in week 21 of 2023

- In week 21, 2023, the IDSR reporting timeliness and completeness were **87%** and **90%** respectively and timeliness and completeness for EWARNS sites were at **89%** and **90%** respectively
- A total of 140 alerts were triggered in week 21, 2023 most of the alerts were for AWD (21), measles(23), malaria(35) and bloody diarrhea (22) alerts
- Ministry of Health Republic of South Sudan declared cholera outbreak in Malakal with a total of 1471 cases reported with Two (2) death giving a CFR of 0.14% from February 22 to 16 May 2023 from both Malakal IDP camp and town
- Measles outbreaks continue with 6,138 reported; cases, 3,109 (14.2%) are epi-linked, 610(10.9%) lab-confirmed, 1,753(68.1%) clinically compatible, and 666(6.8) discarded cases have been reported from epidemiological week 1, 2022, to week 21, 2023
- Hepatitis E Virus outbreak in Western Bahar el Ghazal State with 164 cases and 7 deaths CFR 4.3% since the start of the outbreak. No new case reported in week 21 of 2023

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 21 & 20 of 2023



Timeliness States Ranking	States	Number of reporting sites	No. of HF's Reported on Time in WK 21	Timeliness Percentage of WK 21	No. of HF's Reported on Time in WK 20	Timeliness Percentage of WK 20
1st	WES	217	217	100%	218	100%
2nd	CES	128	126	98%	123	96%
3rd	Lakes	113	111	98%	90	80%
4th	EES	105	91	87%	91	87%
5th	NBGZ	89	77	87%	76	85%
6th	Warrap	127	109	86%	98	77%
7th	Jonglei	129	101	78%	101	78%
8th	WBGZ	78	59	76%	41	53%
9th	Unity	97	72	74%	56	58%
10th	Upper Nile	113	79	70%	79	70%
	South Sudan	1196	1042	87%	973	81%

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 21 stands at 87% while in week 20 it was 81% with 6 states above the National target of 80% .

Reporting Challenges in the poorly performed States are; insecurity, internet inaccessible; Turnover of Partners.



IDSR Completeness performance at State level for week 21 & 20 of 2023



Completeness States Ranking	States	Number of reporting sites	No. of HFs Reported regardless of time in WK 21	Completeness Percentage of WK 21	No. of HFs Reported regardless of time in WK 20	Completeness Percentage of WK 20
1st	WES	217	217	100%	217	100%
2nd	CES	128	126	98%	124	97%
3rd	Lakes	113	111	98%	108	96%
4th	EES	105	100	95%	99	94%
5th	NBGZ	89	79	89%	85	96%
6th	Warrap	127	112	88%	100	79%
7th	WBGZ	78	65	83%	72	92%
8th	Jonglei	129	102	79%	112	87%
9th	Unity	97	76	78%	81	84%
10th	Upper Nile	113	84	74%	86	76%
	South Sudan	1196	1072	90%	1084	91%

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 21 stands at 90% while in week 20 it was at 91% with 7 states above the national target of 80%.

Reporting Challenges in the poorly performed States includes; insecurity; internet inaccessible; Turnover of Partners, Floods.



Surveillance: EWARS Timeliness performance indicator by partner for week 21 and 20 of 2023



Partner	HFs	Reporting	Performance		
PARTER	Number of reporting sites	# of reports received on Time in Week 21	Timeliness of Week 21	# of reports received on Time in Week 20	Timeliness of Week 20
World Relief	3	3	100%	3	100%
Medair	2	2	100%	2	100%
CIDO	1	1	100%	1	100%
TRI-SS	2	2	100%	2	100%
SMC	6	6	100%	6	100%
Medicair	5	5	100%	5	100%
SSHCO	1	1	100%	1	100%
AFAA	1	1	100%	1	100%
ForAfrika	13	13	100%	13	100%
IMC	22	22	100%	22	100%
IRC	1	1	100%	0	0%
Islamic Relief	5	5	100%	0	0%
HFO	10	9	90%	9	90%
IOM	10	9	90%	6	60%
MSF-H	4	3	75%	3	75%
MSF-E	6	4	67%	4	67%
SCI	2	1	50%	2	100%
SP	8	4	50%	8	100%
UNIDOR	2	1	50%	1	50%
TOTAL	104	93	89%	89	86%

The Timeliness of EWARS in partners' supported sites stands at 89% in week 21 while in week 20 it was at 86%



Surveillance: EWARS completeness performance indicator by partner for week 21 and 20 of 2023

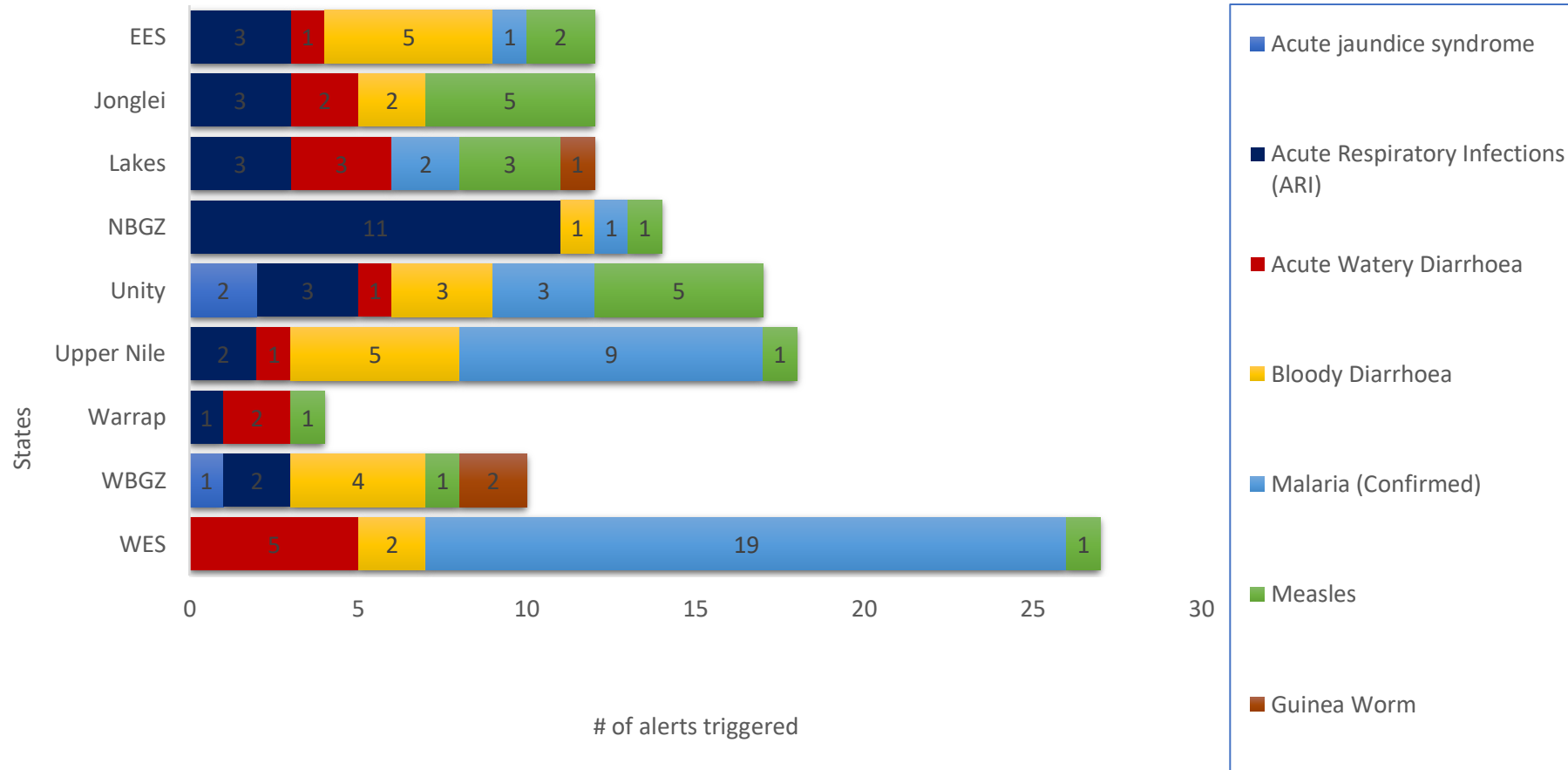


Partner	HFs	Reporting	Performance		
PARTER	Number of reporting sites	# of reports received regardless of Time in Week 21	Completeness of Week 21	# of reports received regardless of Time in Week 20	Completeness of Week 20
SSHCO	1	1	100%	1	100%
IRC	1	1	100%	1	100%
Islamic Relief	5	5	100%	5	100%
CIDO	1	1	100%	1	100%
World Relief	3	3	100%	3	100%
Medair	2	2	100%	2	100%
ForAfrika	13	13	100%	13	100%
TRI-SS	2	2	100%	2	100%
Medicair	5	5	100%	5	100%
MSF-H	4	4	100%	4	100%
SMC	6	6	100%	6	100%
AFAA	1	1	100%	1	100%
IMC	22	22	100%	22	100%
HFO	10	9	90%	10	100%
IOM	10	9	90%	6	60%
MSF-E	6	4	67%	4	67%
SCI	2	1	50%	2	100%
SP	8	4	50%	8	100%
UNIDOR	2	1	50%	1	50%
TOTAL	104	94	90%	97	93%

The Completeness of EWARS in partners' supported sites stands at **90%** in week **21** while in week **20** it was at **93%** .



Alert by disease and States in week 21 of 2023 [a total of events specific alerts generated by state



This week a total of 140 Alerts were triggered of which 46 are from outbreak prone diseases as Per the broken-down below

- ❖ 21 AWD alerts: these alerts were triggered from the following States, CES (6), EES (1), Jonglei (2), Lakes(3), Upper Nile (1), Unity(1), Warrap (2), WES(5)
- ❖ 23 Measles alert: these alerts were triggered from the following States, CES(4), EES (2), Jonglei (5), Lakes (3), NBGZ (1), Unity(5), Upper Nile (1), Warrap(1), WBGZ (1), WES(1)
- ❖ 4 AJS alert: these were from MSF-H Leer PHCC and Mary help hospital in Jur River, Yambio State Hospital, MSF-H Bentiu IDP Hospital

INDICATOR-BASED SURVEILLANCE

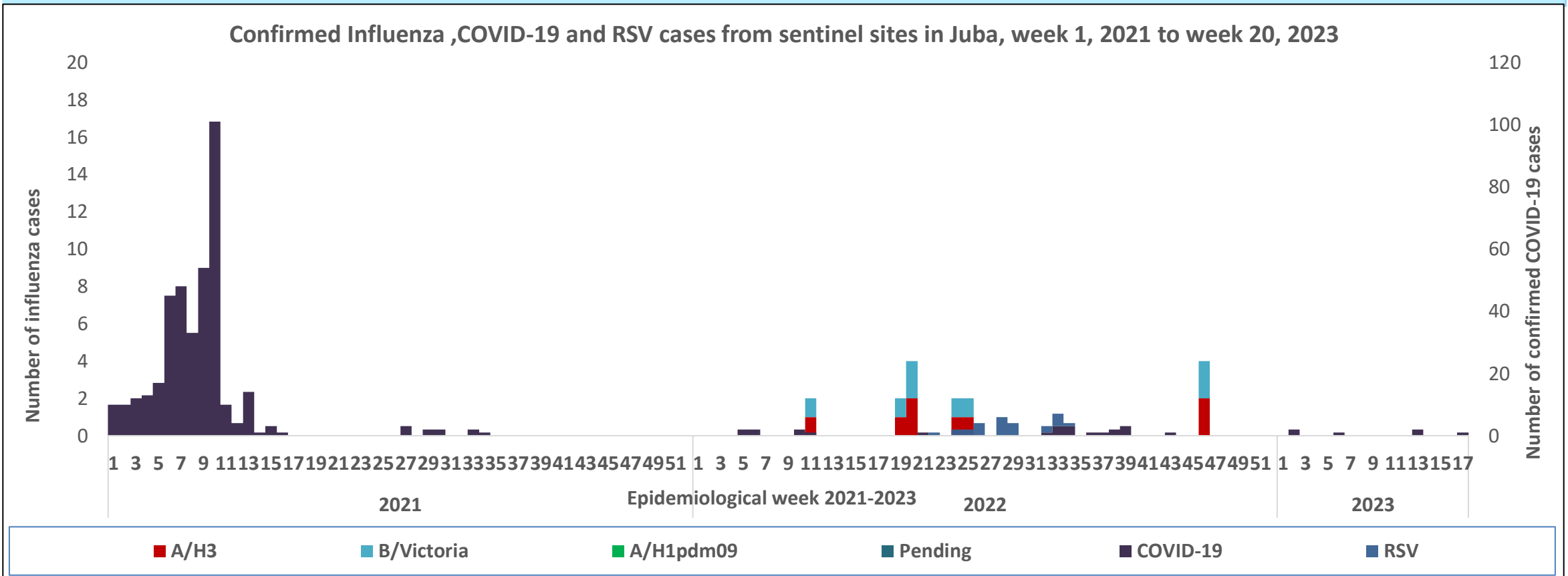


Alert management including detection; reporting; verification;
risk assessment; & risk characterization

Influenza sentinel Surveillance updates



Routine Sentinel Surveillance | Human Influenza & other Respiratory Pathogens



- 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 week **52,2022**; a total of **594 ILI/SARI** samples were collected,**529** samples tested negative, and Cumulatively, **21** tested positive for covid-19,8 positive for Influenza B (Victoria), and **6** were positive for influenza A(H3).26 RSV was confirmed in Week 52
- From weeks 1-17 2023, a total of 196 ILI/SARI were collected all 190 tested negative,6 positives for Covid-19, (0)Influenza types A (H3), B (Victoria), and 0 for RSV. No new positive case reported for covid-19 in week20 of 2023



**ACTIVE OUTBREAKS AND
PUBLIC HEALTH EVENTS**



The image shows a title slide for a presentation. It features a dark blue background with a lighter blue geometric pattern on the left and right sides. The text "HEV OUTBREAKS IN WAU" is centered in a bold, yellow font.

HEV OUTBREAKS IN WAU



HEV Outbreak in Wau, WBG state updates as from 26 May 2023



- On March 22, 2023, the state Ministry of Health Western Bahr el Ghazal state notified the Ministry of Health in Juba of clusters of cases and deaths in Wau.
- Cases presented with yellowing of eyes (Acute Jaundice Syndrome).
- State MOH and WHO conducted alert verification and collected samples for further investigations.
- On April 14, 2023, the national Ministry of Health declared an outbreak of Hepatitis E Virus (HEV) disease and subsequently activated the PHEOC to response mode and all response pillars
- Total of 164 HEV Cases including (7 death) CFR of 4.3% has been since the start of the outbreak
- No new case detected today; the total 164 cases remain.
- Most cases (123, 75 %) are from Nazareth Village, a cluster in Kosti village (4) and sporadic cases in three neighboring villages of Mutamadia (1), Taban (1), Massna (4) and new village of Lokoloko(1) and Aturu in Jur river county (12).
- Most cases (108, 66 %) are males. The median age is 20 (range:2-71) years. Overall,
- Overall CFR= 4.3 % versus 9.8 % in females and 2.4 % in males. 1 admission at Wau teaching hospital as of 26 May 2023.



Fig 1: Map of Wau county, Western Bahr el Ghazal, South Sudan

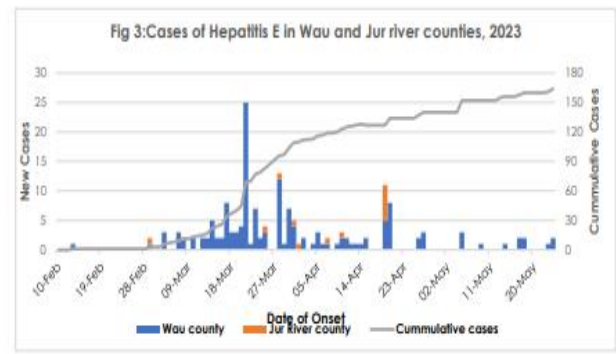


Table 1: Outcomes of onsite RDT Testing for Acute Jaundice Syndrome cases -Wau, April 7- May25, 2023 remain

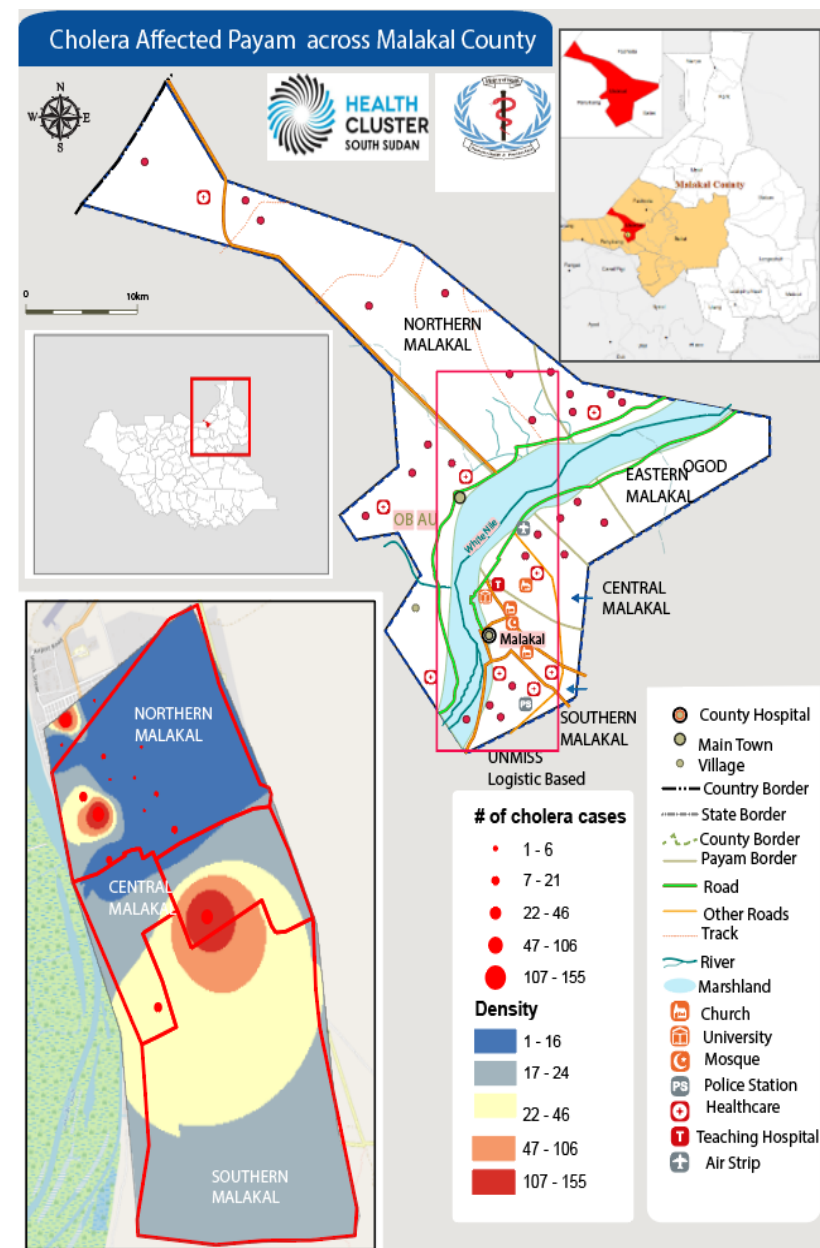
Number	Test type		
	Hepatitis B (n=48)	Hepatitis C (n=48)	Hepatitis E (n=38)
Number	5	24	50
% positive	4%	0%	30%



CHOLERA OUTBREAK IN MALAKAL

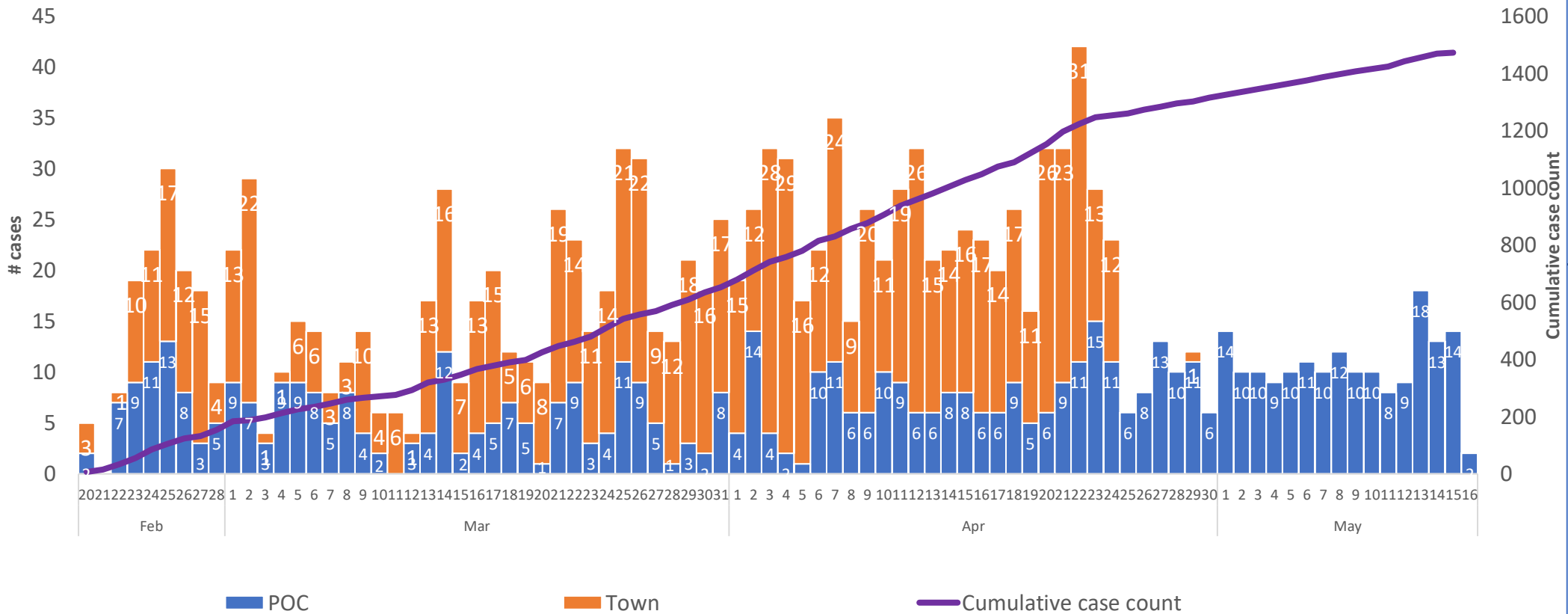
Key Epidemiological highlights from Malakal as of 16th May 2023

- On 1st March 2023, the National Ministry of Health received information of suspected cholera cases with two (2) RDT positive
- On 2nd March 2023, nine (9) samples were received at the NPHL, and **two (2) samples tested positive for vibrio cholerae** by Polymerase chain reaction (PCR) on 6th March 2023.
- on 7th March 2023, the National Ministry of Health declared Cholera outbreak in Malakal county, Upper Nile State
- There was no cholera case or death reported in the last 2 week
- The last two(2) cholera cases were reported on 16 May 2023
- Cumulatively, since 22nd February 2023, the **total Cholera cases** stands at **1471** with Two (2) death (**CFR-0.14%**)
- Oral Cholera vaccination campaign commenced on 16 March 2023 targeting 66,121 individuals aged 1 year and above in the POC and Malakal town.
- Cumulatively, 54,538 people have been vaccinated (Malakal town and POC) with OCV achieving 82% coverage.
- The current cholera outbreak is localized in Malakal Upper Nile State on the side boarding Sudan.



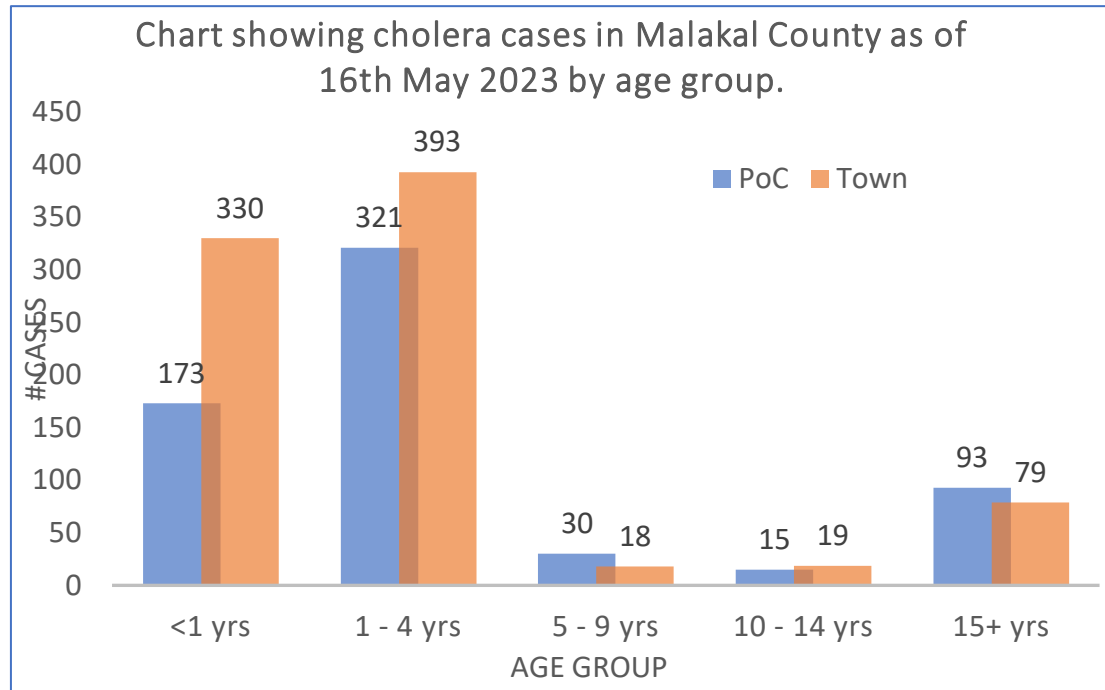
Epi curve showing cholera cases in Malakal County

Epi curve showing cholera cases in Malakal County as of 16th May 2023



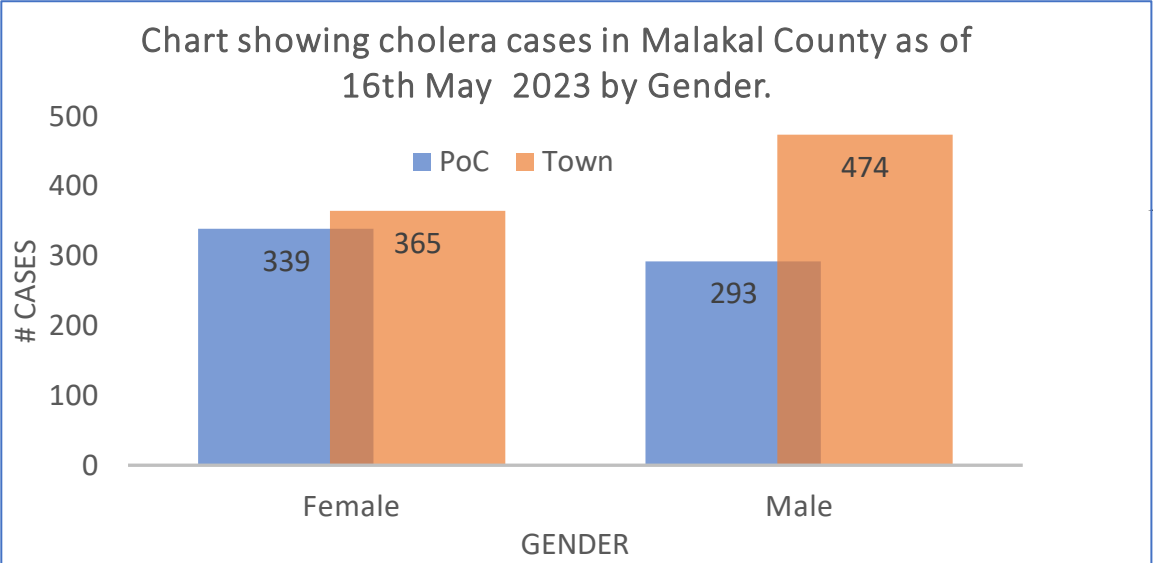
- The cumulative cases up to date stands at 1,471.
- Cumulative number of deaths reported = 2 (CFR = 0.14%).
- Malakal town accounted for 57% (839) of all the reported cases, while PoC accounted for 43% (632).
- Two cases were recorded on May 16th, all cases were reported from the PoC.

Cholera cases in Malakal County by age group.



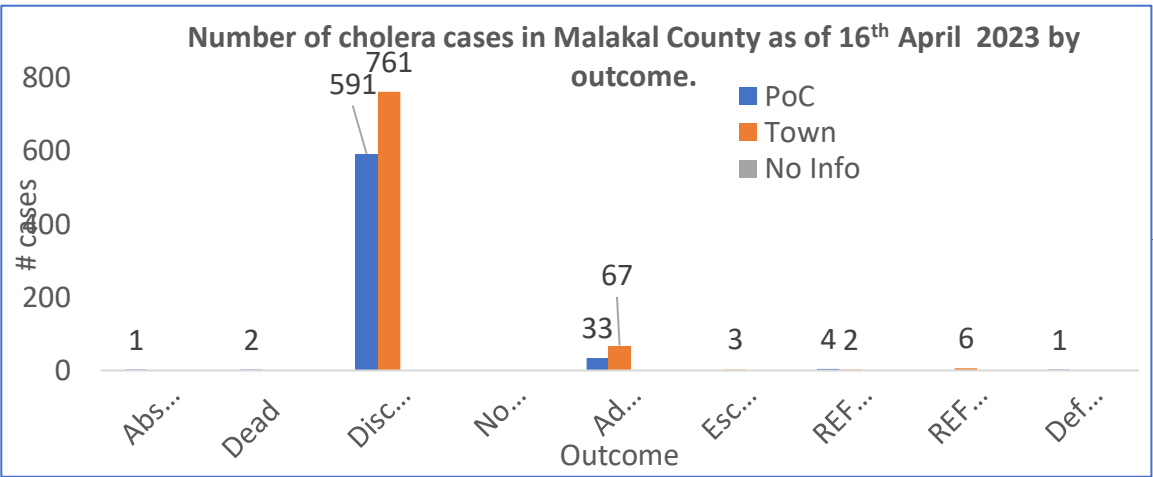
- In terms of case distribution by age group, children of age 1 – 4 years old are the most affected which accounting for (49%, n=714), followed by those under 1 year old (34%, n=503).
- The highest number of cases among children aged 1-4 years was reported in Malakal town (393), with a total of 321 cases reported in the PoC.

Age group	Cases	Percentage	Cum %
<1 yrs	503	34%	34%
1 - 4 yrs	714	49%	83%
5 - 9 yrs	48	3%	86%
10 - 14 yrs	34	2%	88%
15+ yrs	172	12%	100%
Grand Total	1471	100%	

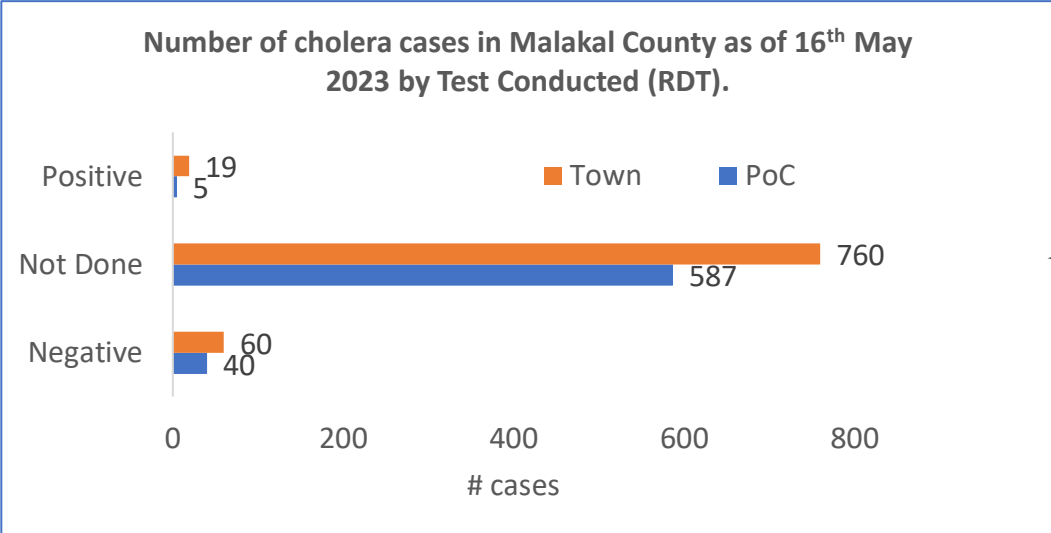


- The gender distribution of the total sample indicates that male constitute of 52% (767) while women constitute of 48% (704). Malakal town has the highest number of reported cases among both genders.

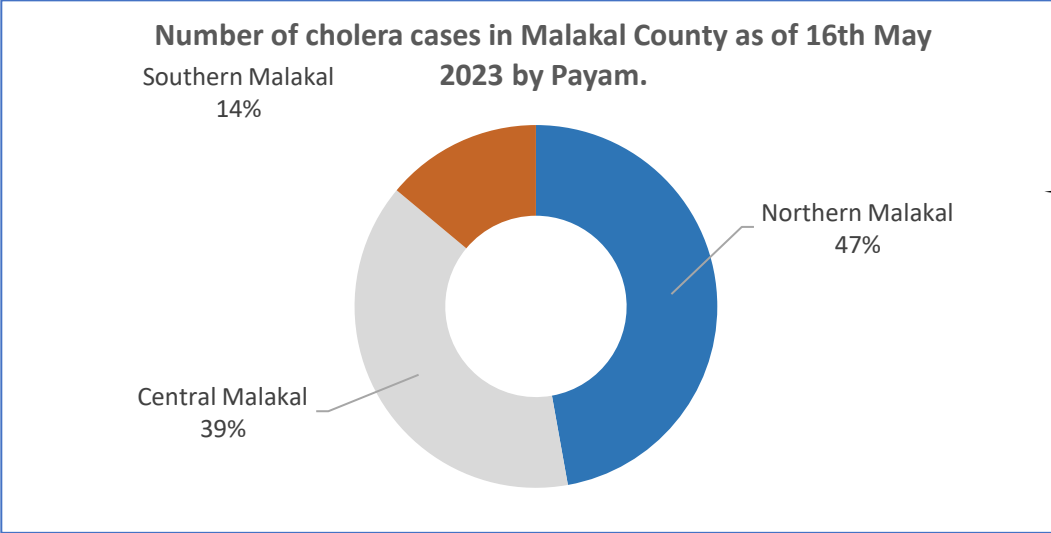
Gender	Cases	Percentage	Cum %
Female	704	48%	48%
Male	767	52%	100%
Grand Total	1471	100%	



- No inpatient reported on 16th May 2023. Majority of the cases have been discharged from the cholera treatment centers both in town and PoC as depicted in the graph.
- The cumulative death stand at 2 since the onset of the outbreak;
- 6 cases referred to IPD, and 6 referred to ITFC.

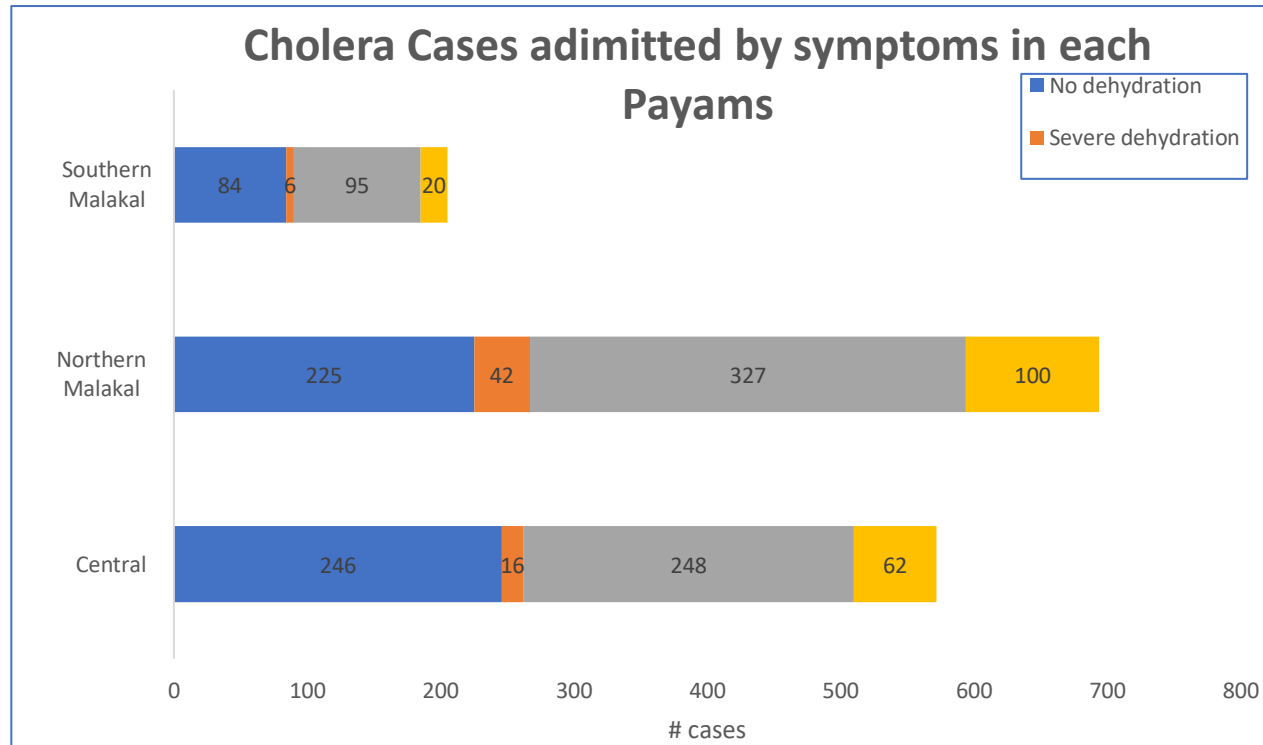


- No positive case confirmed by RDT on May 16th
- Since the onset of outbreak, 24 cases have tested positive on RDT, with 19 cases in the town and 5 cases PoC.
- 100 negative RDT Cholera cases, and 1,347 without RDT confirmation.



- The Cholera cases have been reported from three (3) Payams namely: Central; Northern Malakal and Southern Malakal.
- Malakal Central reported 39% of the total cases and Northern Malakal account for 47% while Southern Malakal recorded 14%.

Cholera Cases Admitted by Symptoms



- Out of the total number of the cholera cases 555 cases presented with no dehydration;
- 64 cases were identified with severe dehydration;
- 670 cases were presented with some/mild dehydration;
- 182 cases unclassified in the line list.

Key ongoing interventions and Challenges in Malakal as of May 2023

Key Interventions

- The National Ministry of Health declared a Cholera outbreak in Malakal county, Upper Nile State on 7th March 2023,
- The National EOC was immediately activated and MOH IMS instituted
- Ongoing coordination at both National and State levels to discuss the ational and State Cholera Taskforce continue to meet regularly to provide operational and strategic guidance to the ongoing cholera outbreak response.
- A multisectoral National and State RRT continue to provide epidemiological investigation and technical support to the response interventions in Malakal County.
- Launching of the Oral cholera vaccination targeting 66,121 individuals aged 1 year and above on 16 March 2023
- Over 54,538 people have been vaccinated both in the POC and Malakal town with a coverage of 83% in 5 days.
- WHO hired 2 additional vehicles to support response activities in Malakal.
- WHO dispatched 1 x 48sqm and 1 x 24sqm medical tents to Malakal to support the ongoing Cholera response.
- WHO conducting a 5 days Case management training starting on 28 March and 1 April 2023 to support health partners (IMC, IOM, MSF and DRC)
- MSF completed the rehabilitation the Cholera treatment Center (CTC) in PoC and functional from Monday it will be official open
- 7 ORP supported IMC and 2 ORP supported by IOM with a total of 121 patient see, presented with AWD, no dehydration status, treated with ORS and discharged in 4 hours.
- Cumulation of 590 cholera case managed at the MSF facilities sites both for PoC with 215 (36%) and Town with 375 cases (64%).
- WHO/MOH continue to conduct active case searches in three (3) Health facilities (IOM PHCC, IMC PHCC & MSF Isolation in POC
- Cholera-specific training conducted focusing on Case Management, Lab, RCCE, IPC, WASH & Surveillance

Source: Situation report: No. 008

Challenges

- Inadequate access to safe and clean water due to limited WASH supplies.
- Sub-optimal risk communication and community engagement in cholera affected high-risk locations.
- Inadequate RDT testing of suspected cholera cases at the subnational level, most especially, in health facilities and treatment centers.
- Lack of designated ambulance to facilitate referral of cholera cases and designated vehicle for the safe dignified burial (SDB) team.
- Identification of personnel to be trained safe and dignified burial (SDB).
- Overcrowding in the POC due to the continued influx of IDPs poses is a major challenge to the limited WASH facilities in the POC.
- The CTC in Malakal Teaching Hospital (MTH) has been closed and cases are been referred to POC
- Activation of the State RRT to responses with an active case search and investigation

Risk of Cholera spread to other states

Oral cholera vaccination was conducted only in 6 out of the 20 cholera hotspot counties

Significant population movements within Malakal IDP camps (Estimated Population is 34056) and back and forth movement between the IDPs in Juba and the displacement due to recent Sudan crisis could pose more risk of cholera transmission in Malakal to other States.

There is also a challenge of access to safe and clean water and the practice of open defecation, and this has been worsened by the influx of Sudan refugees and the South Sudan returnees through Renk

Continued flooding due to heavy rain experienced in the past 4 years & the next rainy season is likely to start in April



**World Health
Organization**
South Sudan

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

MEASLES ` UPDATES



Measles Updates as of 21 May 2023



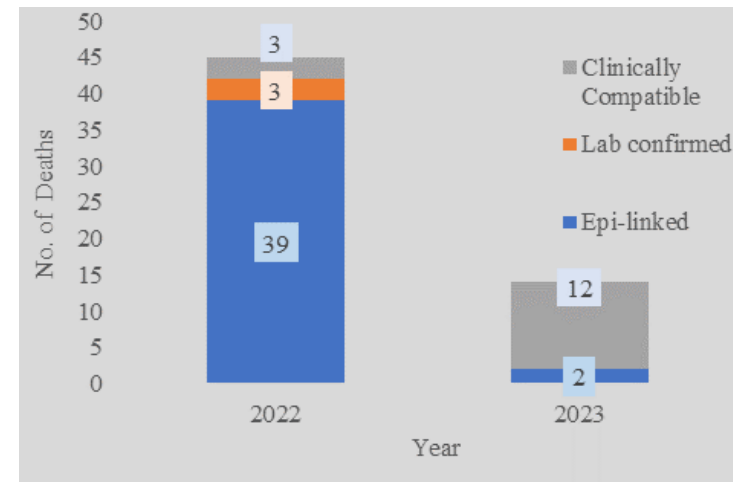
- A cumulative of 6,138 suspected cases have been reported; 4,137 in 2022 and 2,001 in 2023,
- No new suspected case or death has been reported during the reporting week
- No new confirmed outbreak this week
- Five (5) new samples received from Duk, 2 from Blue Nile State (Kurumuk-Sudan), and 1 from Abyei (case from Sudan), but to be tested
- Viral Transport Media (VTM) distributed to selected counties and yet to receive and Nasopharyngeal or Throat Swab for sequencing
- Final Classification of Cases
 - 3,109 (50.7.%) are epidemiologically-linked
 - 610 (9.9%) laboratory-confirmed
 - 1,753 (28.5%) clinically compatible and
 - 666 (10.8%) discarded cases

Source: measles weekly sitrep

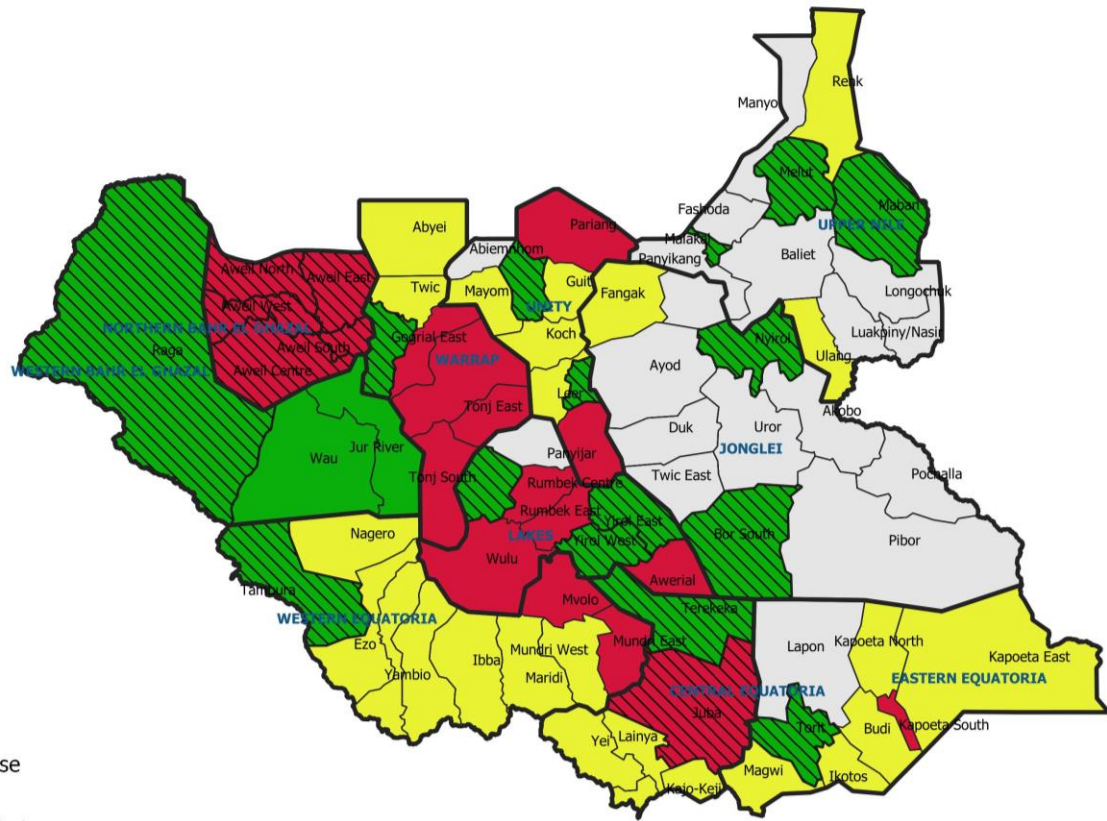
Table: Yearly distribution of cases by final classification

FINAL CLASSIFICATION	2022		2023		TOTAL
	NO. OF CASES	%	NO. OF CASES	%	
Lab confirmed	392	9.5	218	10.9	610
Epi-linked	2,825	68.3	284	14.2	3,109
Clinically Compatible	391	9.5	1,362	68.1	1,753
Total	3,608	87.2	1,864	93.2	5,472
Discarded (-ve)	529	12.8	137	6.8	666
Grand Total	4,137	100.0	2,001	100.0	6,138

Deaths by year and final classification

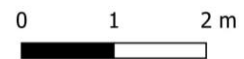


A total of 59 measles-related deaths were reported since January 2022, with only 3 deaths among the lab-confirmed measles cases and 41 among the epi-linked cases.



Legend

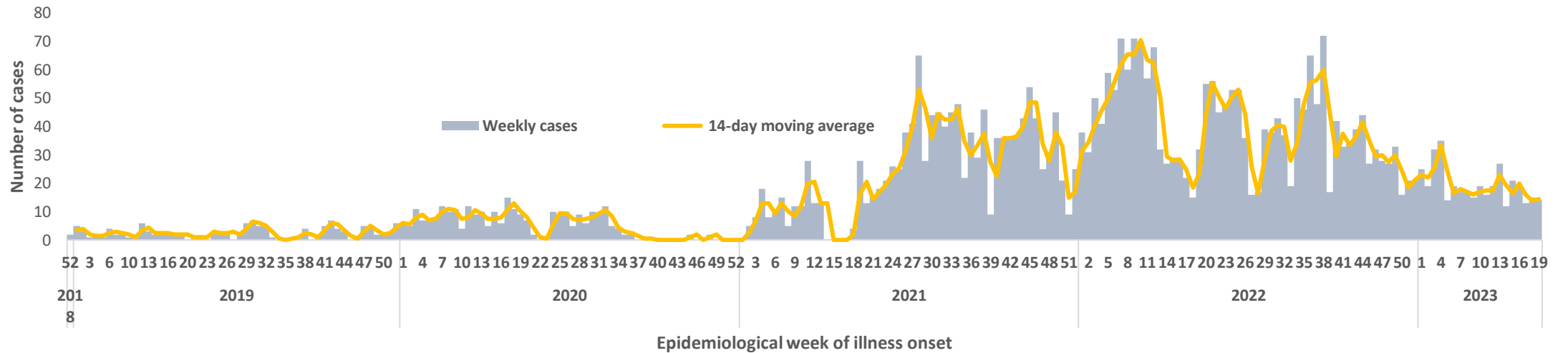
-  Response
-  Active
-  Controlled
-  Suspected Cases
-  No Reported Cases



ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

HEPATITIS E VIRUS ` UPDATES

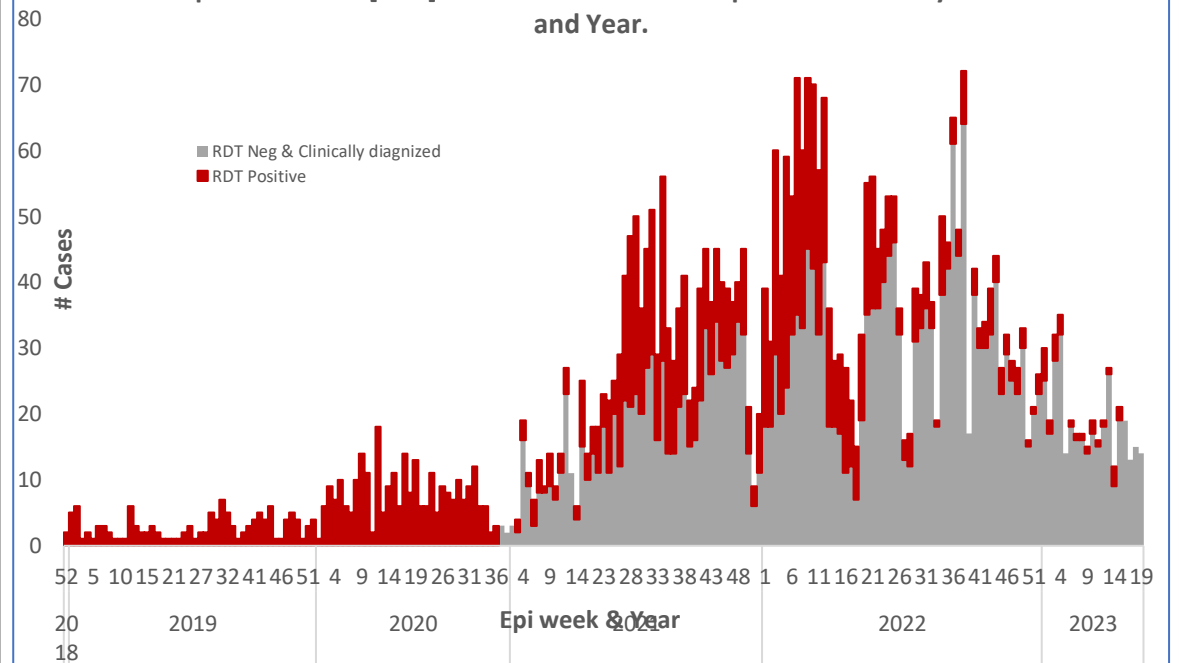
Hepatitis E Virus [HEV] cases in Bentiu IDP camp, week 1, 2019 to week 20, 2023



Descriptive Epi

- Cases of Acute Jaundice Syndrome (AJS) in the Bentiu IDP camp continue with an overall total of 4,165 cases since the beginning of 2019 to week 20 2023 with overall 27 deaths. CFR of 0.65%
- Of all the cases, reported, 1481 tested positive for Hepatitis E virus by Rapid Diagnostic Test.
- In 2023, of the 326 AJS cases reported, only 28 tested positive for Hepatitis E Virus by RDT.
- No new AJS cases reported in week 21 and no RDT positive reported in week 21 2023
- Of all the AJS cases reported in, 2023 only 105 were managed as inpatient cases and the rest were treated as outpatients
- 46% are female and 54% are male of all the AJS. 40% of all the cases are in the age-group 15-44 years followed by 24% in children ages 1-4 years

Hepatitis E Virus [HEV] cases in Bentiu IDP camp 2018 to 2023 by week and Year.



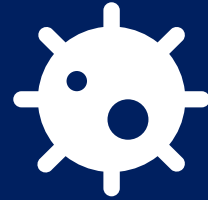
HEV response update

1. 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).
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. Floods have worsened the WASH situation in the camp

COVID-19 UPDATES



Situation update as of 31, May 2023

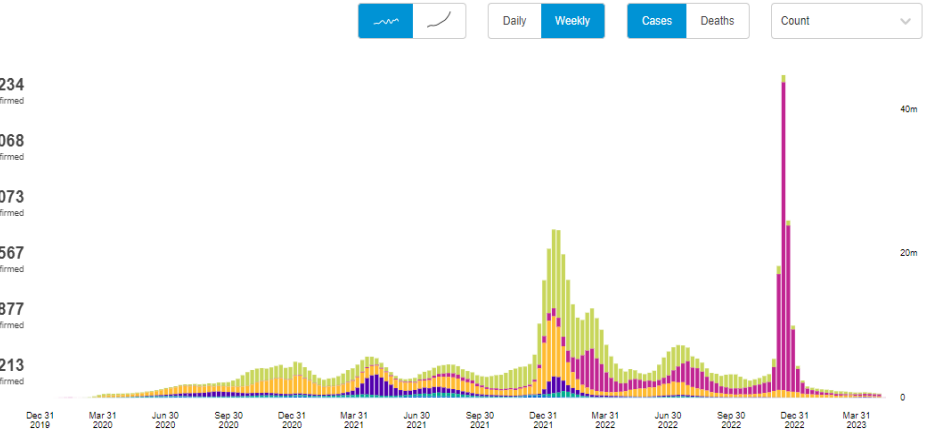
- Globally**, 31 May 2023, there have been **767,364,883** confirmed cases of COVID-19, including **6,938,353** deaths, reported to WHO.

As of 30 May 2023, a total of **13,375,580,553** vaccine doses have been administered.
- In Africa**, as of 31 May 2023 there have been **9,532,788** confirmed cases of COVID-19, including **175,371** deaths reported to the WHO
- In South Sudan**, from 3 January 2020 to 31 May 2023, there have been **18,368** confirmed cases of COVID-19 with 138 deaths, reported to WHO. As of 7 May 2023, a total of **4,312,900** vaccine doses have been administered.
- Second round of the COVAX campaign has been launched and the campaign is ongoing in most counties to cover the remaining 72 counties

Situation by WHO Region

Europe	276,264,234 confirmed
Western Pacific	203,414,068 confirmed
Americas	192,718,073 confirmed
South-East Asia	61,143,567 confirmed
Eastern Mediterranean	23,369,877 confirmed
Africa	9,530,213 confirmed

Source: World Health Organization
Data may be incomplete for the current day or week.



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



**OVERALL
CONCLUSIONS AND
RECOMMENDATIONS**

Conclusions



- In week 21, 2023, the IDSR reporting timeliness and completeness were 87% and 90% respectively and timeliness and completeness for EWARN sites were at 89% and 90% respectively
- A total of 140 alerts were triggered in week 21, 2023 most of the alerts were for AWD (21), measles(23), malaria(35) and bloody diarrhea (22) alerts
- Ministry of Health Republic of South Sudan declared cholera outbreak in Malakal with a total of 1471 cases reported with Two (2) death giving a CFR of 0.14% from February 22 to 16 May 2023 from both Malakal IDP camp and town
- Measles outbreaks continue with 6,138 reported; cases, 3,109 (14.2%) are epi-linked, 610(10.9%) lab-confirmed, 1,753(68.1%) clinically compatible, and 666(6.8) discarded cases have been reported from epidemiological week 1, 2022, to week 21, 2023
- Hepatitis E Virus outbreak in Western Bahar el Ghazal State with 164 cases and 7 deaths CFR 4.3% since the start of the outbreak on 22 March 2023. No new cases reported in week 21 of 2023

Recommendations



- Partners to continue supporting County Health Departments (CHD) & State Ministries of Health on timely IDSR/EWARN reporting and involve the boma health workers to support community-based surveillance
- Health facilities to conduct an initial investigation on suspected cases of epidemic-prone diseases and collect samples
- Continue with preparedness activities to strengthen surveillance at all levels including conducting after-action reviews and simulation exercises.
- Continue to support the multicluster HEV response strategy in the Bentiu IDP camp Wau County and advocate for depopulation of the camp

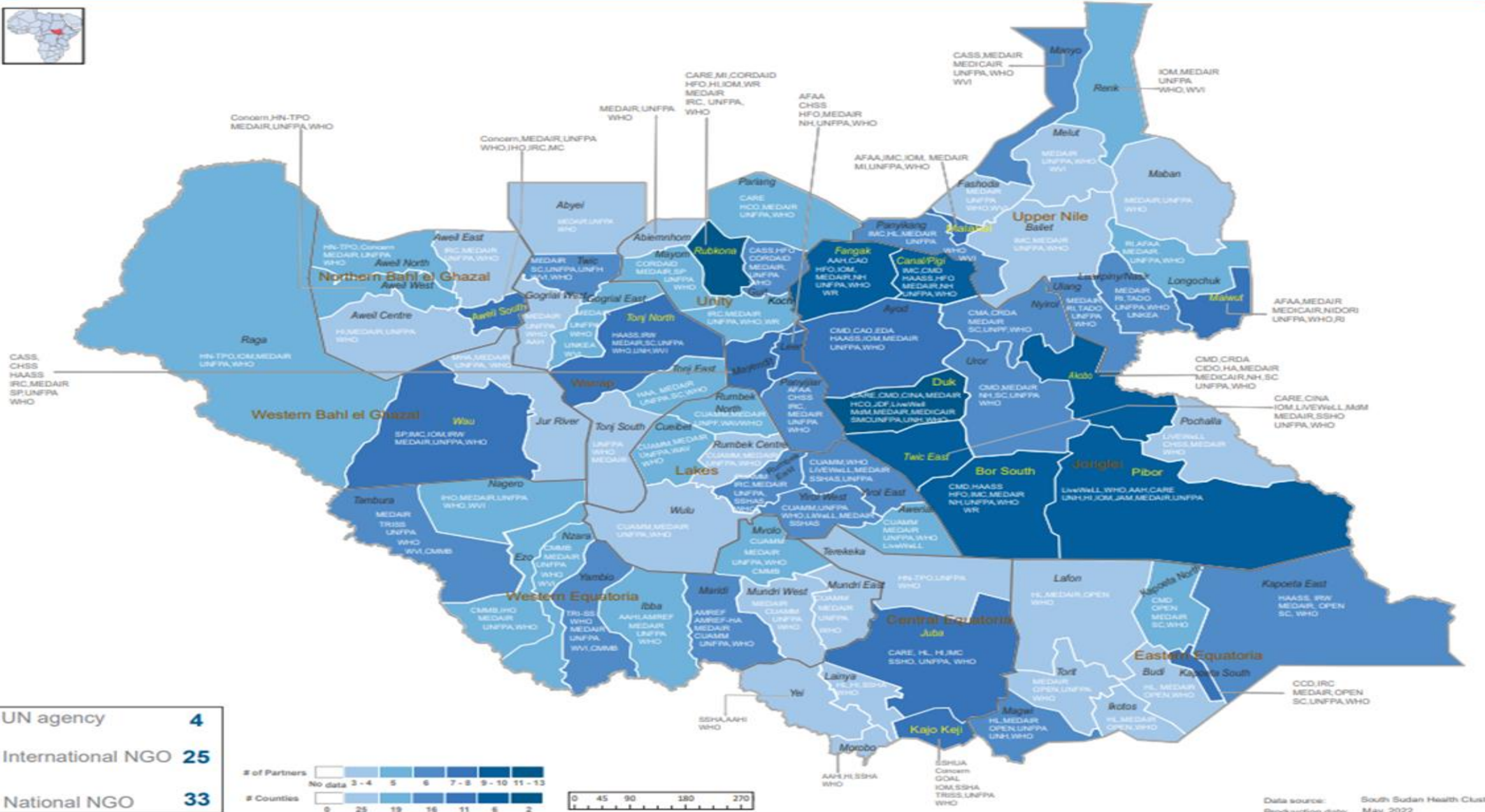


IDSR timeliness & completeness performance at county level for week 21 and 20 of 2023 (2)



STATE	COUNTY	Number of reporting sites	No. of HF's Reported on Time in WK 21	Timeliness Percentage of WK 21	No. of HF's Reported regardless of time in WK 21	Completeness Percentage of WK 21	No. of HF's Reported regardless of time in WK 20	Completeness Percentage of WK 20	STATE	COUNTY	Number of reporting sites	No. of HF's Reported on Time in WK 21	Timeliness Percentage of WK 21	No. of HF's Reported regardless of time in WK 21	Completeness Percentage of WK 21	No. of HF's Reported regardless of time in WK 20	Completeness Percentage of WK 20
									Warrap	Tonj East	12	12	100%	5	42%	12	100%
Jonglei	Pibor	8	8	100%	8	100%	8	100%	Warrap	Tonj South	12	12	100%	12	100%	12	100%
Jonglei	Bor	19	19	100%	19	100%	19	100%	Upper Nile	Baliet	5	5	100%	5	100%	5	100%
Jonglei	Pochalla	7	7	100%	7	100%	7	100%	Upper Nile	Panyikang	2	2	100%	2	100%	2	100%
Jonglei	Duk	13	13	100%	13	100%	13	100%	Upper Nile	Longechuk	9	9	100%	4	44%	9	100%
EES	Budi	17	17	100%	17	100%	16	94%	Upper Nile	Maban	19	17	89%	9	47%	19	100%
EES	Lopa Lafon	15	15	100%	15	100%	15	100%	Upper Nile	Ulang	9	8	89%	9	100%	8	89%
EES	Torit	11	11	100%	11	100%	11	100%	Warrap	Gogrial West	31	27	87%	12	39%	27	87%
EES	Kapoeta South	9	9	100%	9	100%	9	100%	Warrap	Gogrial East	15	13	87%	12	80%	14	93%
EES	Kapoeta North	10	10	100%	10	100%	10	100%	Warrap	Tonj North	15	12	80%	15	100%	14	93%
EES	Magwi	17	16	94%	16	94%	16	94%	Upper Nile	Luakpiny Nasir	10	8	80%	8	80%	8	80%
Jonglei	Ayod	13	12	92%	12	92%	13	100%	Upper Nile	Akoka	5	4	80%	0	0%	4	80%
Jonglei	Fangak	21	16	76%	17	81%	15	71%	Warrap	Abyei	14	11	79%	14	100%	11	79%
Jonglei	Uror	8	6	75%	6	75%	6	75%	Warrap	Twic	28	22	79%	2	7%	22	79%
Jonglei	Canal Pigi	14	10	71%	10	71%	10	71%	Upper Nile	Fashoda	9	7	78%	9	100%	7	78%
EES	Ikotos	19	13	68%	16	84%	16	84%	Upper Nile	Makal	9	6	67%	9	100%	6	67%
Jonglei	Akobo	15	9	60%	9	60%	12	80%	Upper Nile	Manyo	15	7	47%	8	53%	8	53%
Jonglei	Nyirrol	2	1	50%	1	50%	1	50%	Upper Nile	Maiwut	9	4	44%	5	56%	6	67%
EES	Kapoeta East	7	0	0%	6	86%	6	86%	Upper Nile	Renk	11	2	18%	6	55%	2	18%
Jonglei	Twic East	9	0	0%	0	0%	8	89%	Upper Nile	Melut	6	0	0%	6	100%	0	0%

South Sudan Health Cluster HRP Partners 2022



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-2023>

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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.

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