



**South Sudan
Ministry of Health**

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



**World Health
Organization**
South Sudan

**Epidemiological Bulletin Week 30, 2023
(July 24– 30 July)**



Major epidemiological highlights in week 30 of 2023

- In week 30, **2023**, the IDSR reporting timeliness and completeness were at **70%** and **82%** respectively, while EWARNS sites were at **59%** and **74%**
- A total of 145 alerts were triggered in **week 30, 2023**, and most of the alerts were for measles 25.5% (34/145), malaria, **22.7%** (27/145), and AWD 13.2% (34/145),
- Highlights on the outcome of the Intra Action Review (IAR) conducted by the Ministry of Health and partners on the ongoing response in Dajo, Longechuk county
- Measles scale-up response (reactive/mop-up campaigns) plan to be conducted in additional 22 prioritized counties as of July 2023
- As of 7 August July, South Sudan received 209,434 individuals (48,103 households) have entered South Sudan since 16 April 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 30 &



States Ranking	Implementing Partners	States	Total Number of Functional Health Facilities	No. of HF's Reported on Time in WK 30	Timeliness Percentage of WK 30	No. of HF's Reported on Time in WK 29	Timeliness Percentage of WK 29
1st	ForAfrika, Medair	GPAA	15	15	100%	15	100%
2nd	Care International	RAA	16	15	94%	16	100%
3rd	AMREF, World Vision, CUAMM, CDTY, OPEN, Rescue	WES	185	163	88%	186	101%
4th	GOAL,, HFO, UNKEA, SCI, AMREF-CCMF, TADO, HAASS, WVI, IRW	Warrap	113	97	86%	91	81%
5th	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	NBGZ	89	74	83%	83	93%
6th	Cordaid, HLSS, OPEN, AMREF-CCMF, IRW	EES	107	87	81%	87	81%
7th	IHO, IOM, CARE, IMC, IRW, MHA	WBGZ	83	62	75%	71	86%
8th	Doctors with Africa (CUAMM), IMA-WH, YCSS, LiveWell-SS	Lakes	112	80	71%	104	93%
9th	Cordaid, IMC, IRC, CASS, IOM, Samaritan's Purse, Medair, MSF-H, WR, HFO, CH	Unity	90	56	62%	72	80%
10th	CMA, Medair, MDM, Medicaire, CRSF, CARE, LiveWell-SS, WR, HFO, AAH, IOM, MSF, SCI, CIDO, IMC, CRESA	Jonglei	112	69	62%	65	58%
11th	IMC, CRES-Aid, Concern WW, Health Link, RI, Cordaid, CASS, SPEDP, NIDO, UNKEA, GOAL, MSF-E, WVI	Upper Nile	134	77	57%	70	52%
12th	HLSS, SSUHA, Concern WW, IHO, GOAL, TRI-SS, SPEDP, IMA-WH, SSHCO, IMC, MSF, CARE	CES	128	42	33%	126	98%
13th	GOAL, SMC	AAA	17	4	24%	4	24%
		South Sudan	1201	841	70%	990	82%

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 30 stands at 70% while in week 29 it was at 82% and 4 states and 2 AAs are 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 30 & 29 of 2023



States Ranking	Implementing Partners	States	Total Numer of Functional Health Facilities	No. of HFs Reported regardless of Time in WK 30	Completeness Percentage of WK 30	No. of HFs Reported regardless of Time in WK 29	Completeness Percentage of WK 29
1st	ForAfrika, Medair	GPAA	15	15	100%	15	100%
2nd	Doctors with Africa (CUAMM), IMA-WH, YCSS, LiveWell-SS	Lakes	112	112	100%	107	96%
3rd	AMREF, World Vision, CUAMM, CDTY, OPEN, Rescue	WES	185	178	96%	185	100%
4th	Care International	RAA	16	15	94%	16	100%
5th	Malaria Consortium, Healthnet TPO, IRC, CEDS, IHO	NBGZ	89	83	93%	86	97%
6th	Cordaid, HLSS, OPEN, AMREF-CCMF, IRW	EES	107	97	91%	95	89%
7th	GOAL, HFO, UNKEA, SCI, AMREF-CCMF, TADO, HAASS, WVI, IRW	Warrap	113	98	87%	105	93%
8th	Cordaid, IMC, IRC, CASS, IOM, Samaritan's Purse, Medair, MSF-H, WR, HFO, CH	Unity	90	76	84%	78	87%
9th	IHO, IOM, CARE, IMC, IRW, MHA	WBGZ	83	69	83%	78	94%
10th	IMC, CRES-Aid, Concern WW, Health Link, RI, Cordaid, CASS, SPEDP, NIDO, UNKEA, GOAL, MSF-E, WVI	Upper Nile	134	95	71%	87	65%
11th	CMA, Medair, MDM, Medicaire, CRSF, CARE, LiveWell-SS, WR, HFO, AAH, IOM, MSF, SCI, CIDO, IMC, CRESA	Jonglei	112	75	67%	69	62%
12th	HLSS, SSUHA, Concern WW, IHO, GOAL, TRI-SS, SPEDP, IMA-WH, SSHCO, IMC, MSF, CARE	CES	128	82	64%	126	98%
13th	GOAL, SMC	AAA	17	4	24%	5	29%
		South Sudan	1201	999	83%	1052	88%

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 30 stands at 83% while in week 29 it was 88% and 7 states and 2 AAs are above the National target of 80% .

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



Surveillance: EWARS Timeliness performance indicator by partner for week 30 and 29 of 2023



Partner	HFs	Reporting	Performance		
PARTER	Total Number of Mobile Sites	# of reports received on Time in Week 30	Percentage of Timeliness in WK 30	# of reports received on Time in Week 29	Percentage of Completeness in WK 29
CIDO	1	1	100%	1	100%
Medicair	2	2	100%	2	100%
IOM	1	1	100%	1	100%
SP	4	4	100%	4	100%
IMC	4	3	75%	3	75%
HFO	5	3	60%	3	60%
TRI-SS	2	1	50%	2	100%
WVI	2	1	50%	1	50%
UNH	2	0	0%	2	100%
SSHCO	1	0	0%	1	100%
SCI	2	0	0%	1	50%
SMC	1	0	0%	0	0%
TOTAL	27	16	59%	21	78%

The Timeliness of EWARS in partners' supported sites stands at 59% in week 30 while in week 29 at was at 78%



Surveillance: EWARS completeness performance indicator by partner for week 30 and 29 of 2023

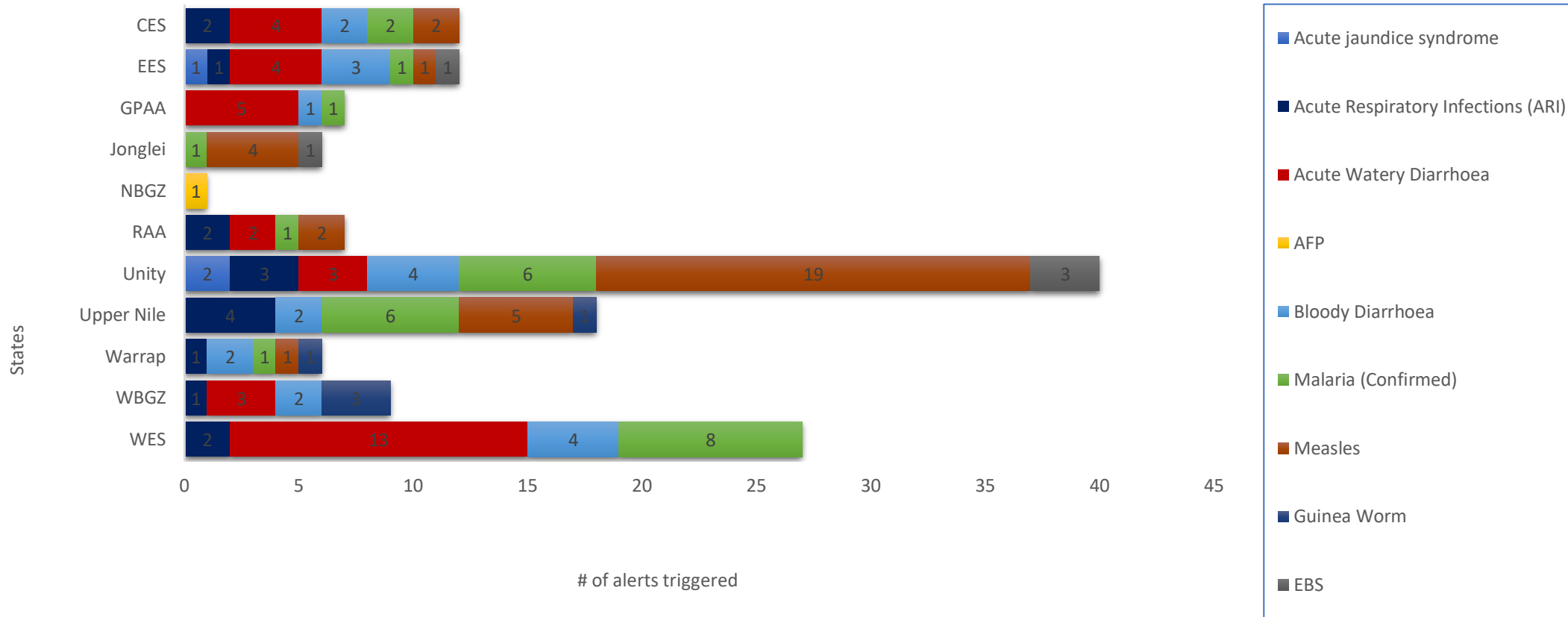


Partner	HF's	Reporting	Performance		
PARTER	Total Number of Mobile Sites	# of reports received on Time in Week 30	Percentage of Timeliness in WK 30	# of reports received on Time in Week 29	Percentage of Completeness in WK 29
CIDO	1	1	100%	1	100%
Medicair	2	2	100%	2	100%
IOM	1	1	100%	1	100%
SP	4	4	100%	4	100%
TRI-SS	2	2	100%	2	100%
IMC	4	4	100%	3	75%
SCI	2	2	100%	1	50%
HFO	5	3	60%	3	60%
WVI	2	1	50%	1	50%
UNH	2	0	0%	2	100%
SSHCO	1	0	0%	1	100%
SMC	1	0	0%	0	0%
TOTAL	27	20	74%	21	78%

The Timeliness of EWARS in partners' supported sites stands at 74% in week 30 while in week 29 it was at 78%



Alert by disease and States in week 30 of 2023 [a total of events specific alerts generated by state



This week a total of 145 Alerts were triggered of which 79 are from outbreak prone diseases as Per the broken-down below

- ❖ 34 AWD alerts: these alerts were triggered from the following States, CES (4), EES (4), Unity (3), WBGZ (3), WES(13),RAA(2),GPAA(5)
- ❖ 34 Measles alert: these alerts were triggered from the following States, CES(2), EES (1), Jonglei (4), RAA(2), Unity(19), Upper Nile (5), Warrap (1)
- ❖ 3 AJS alert: these alerts were triggered from Hileu PHCU in Torit , Bentiu IDP Hospital and Leer PHCC
- ❖ 5 EBS alert: this is from Mirmir PHCC in Koch County, Napeteair PHCC in Kapoeta South, Wicmuon PHCU in Fangak, Boaw PHCC and Rier PHCUin Koch all suspected measles
- ❖ 1 AFP alert: from Gordhiim PHCC in Aweil East

INDICATOR AND EVENT-BASED SURVEILLANCE



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

- **Update from Dajo and Pacime, Longechuk county Upper Nile State.**



Update on Intra Action Review on VHF alert from Longechuk county

- Four weeks after the response initiation, while the response is still ongoing, the MOH EPR invited all key stakeholders to a mini–Intra- Action Review (IAR) to assess the effectiveness of the response to the suspected VHF outbreak in Longechuk County.
- Objectives:
 - Review and document the lessons learned so far during the response to the suspected VHF outbreak in Longechuk County, South Sudan.
 - Identify and document the good and best practices that were implemented during the response.
 - Identify the challenges that were encountered during the response.
 - Provide short, medium, and long-term recommendations for improving future responses to similar public health events, especially in remote and difficult-to-access areas in South Sudan.
- Participants:
 - Ministry of Health (EPR, PHEOC/National Rapid Response Teams)
 - WHO (Headquarters, Regional ESA Emergency Hub, and Country Office)
 - Donors (US-CDC, Africa-CDC, UKAID)
 - Implementing Partners (NIDO, Relief International)
- Four pillars of the response to the alert were reviewed: **Coordination logistics, Surveillance Lab, Case management, and Infection Prevention and Control**

Main Recommendations

Coordination and logistic

- Plan for rapid measles and reactive campaign and malaria intervention in the affected county.
- Plan the deployment of a team to Dukubela to investigate further and collect laboratory samples for testing.
- Identify the geography of Dukubela, whether it is in Maban County or in Blue Nile State of Sudan. (Explore if deployment can be easily done via Ethiopia).
- Reduce administrative processes, such as fast-tracking clearance for NGOs to land/access the geographical areas of concern.
- Include NPHL representative (lead) in the coordination platform to support the fast-tracking of sample collection and analysis.

Surveillance

- Update CIFs (the version used had an old version date) and include environment/animal health components.
- Consider table-top exercise to review sample transportation guidelines/SOP timelines.
- Have a Generic Alert system, Email, Phone number, Satellite Phones, VHS Radios and which are received in Real Time
- Continue county-level capacity building to enhance surveillance, reporting, case investigation, and response to empower them to respond before/without national RRT deployment.

Case management

- May need to conduct in-depth analyses of cases, co-infections, and recoveries (vis-à-vis treatment provided).
- Planned measles vaccination campaign for Longechuk County with affected suspected counties prioritized.
- Relief International also to discussed with UNICEF the possibility of installing a cold-chain unit to operationalize EPI there (there is an existing cold-chain in Chotbora but not sufficient to maintain temperature until Dajo).
- Health facility and supporting IP to share weekly reports to update epidemiological situation.

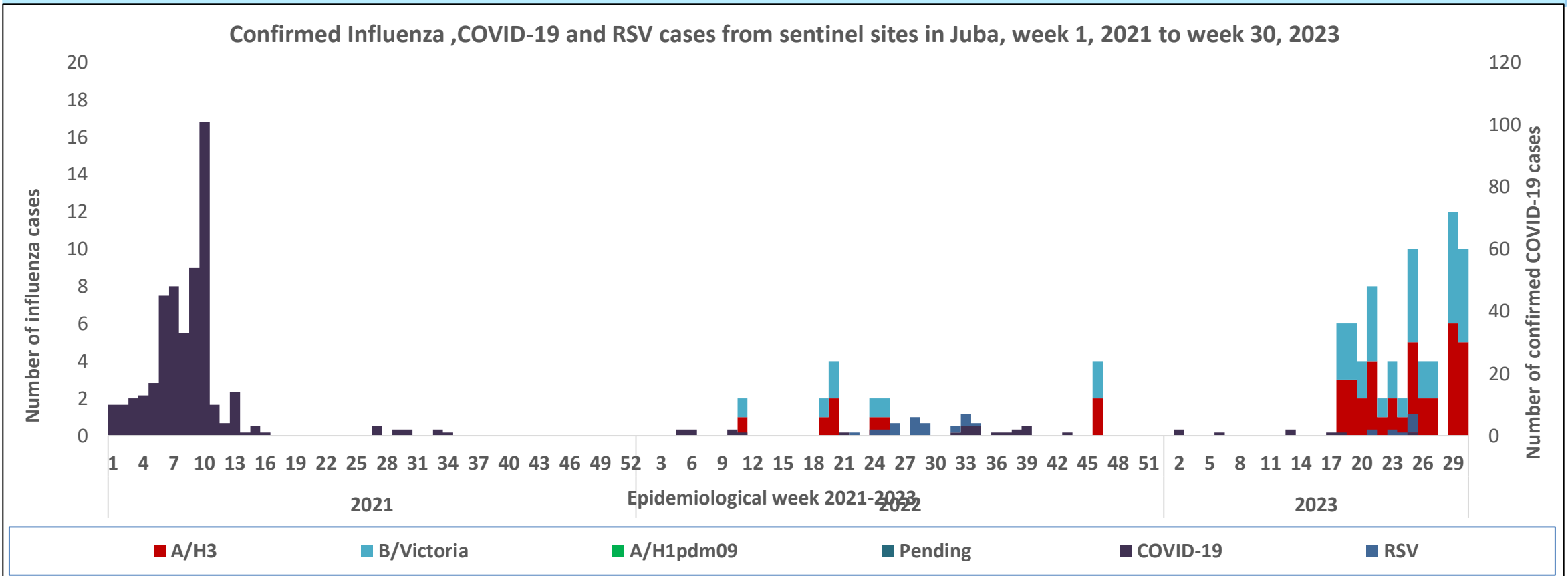
- Establish an IAR Follow-up team led by MOH-EPR including representatives of WHO SSD EPR, Health Cluster, Africa-CDC, UNICEF, MSF, RI, NIDO, UK-AID, and USCDC.
- The IAR follow-up team to:
 - Develop a process to document and monitor progress.
 - The process should include regular reporting on progress, as well as identification of any challenges or areas where additional support is needed.
 - Engage senior leadership throughout the process.
 - The IAR Follow-up Team should keep senior leadership informed of progress, and they should seek their input and support on a regular basis.
 - Prioritize the most important recommendations.



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 1-30 2023, a total of 448 ILI/SARI were collected all 393 tested negative,7 positives for Covid-19, (33)Influenza types A (H3), (1) B (Victoria), 1 for A/H1pdm09 and 13 for RSV in weeks 30,2023



**ACTIVE OUTBREAKS AND
PUBLIC HEALTH EVENTS**

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

MEASLES ` UPDATES



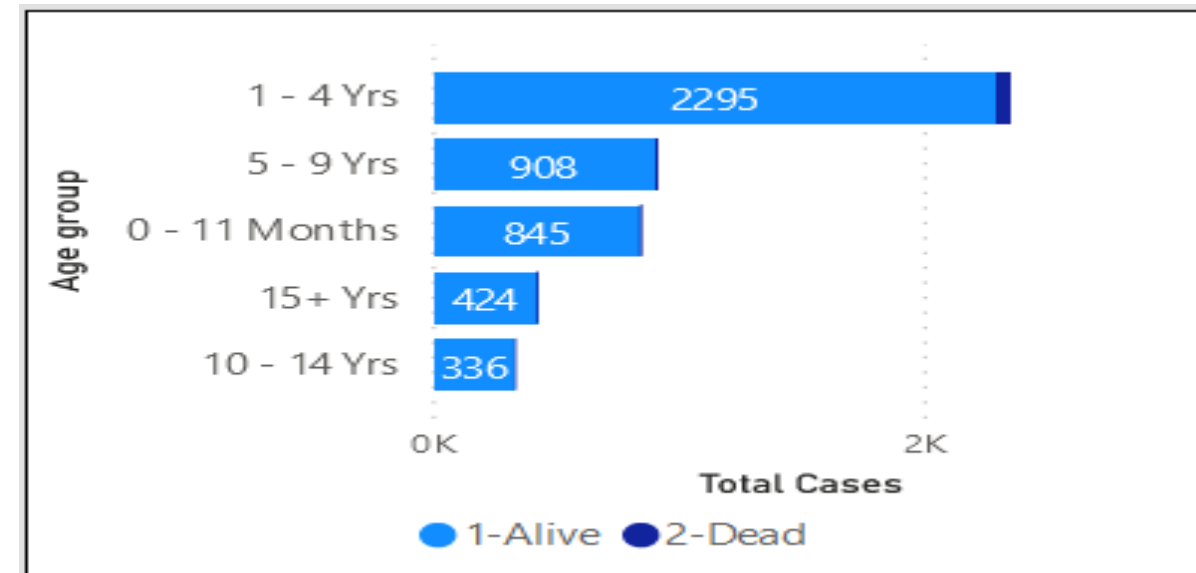
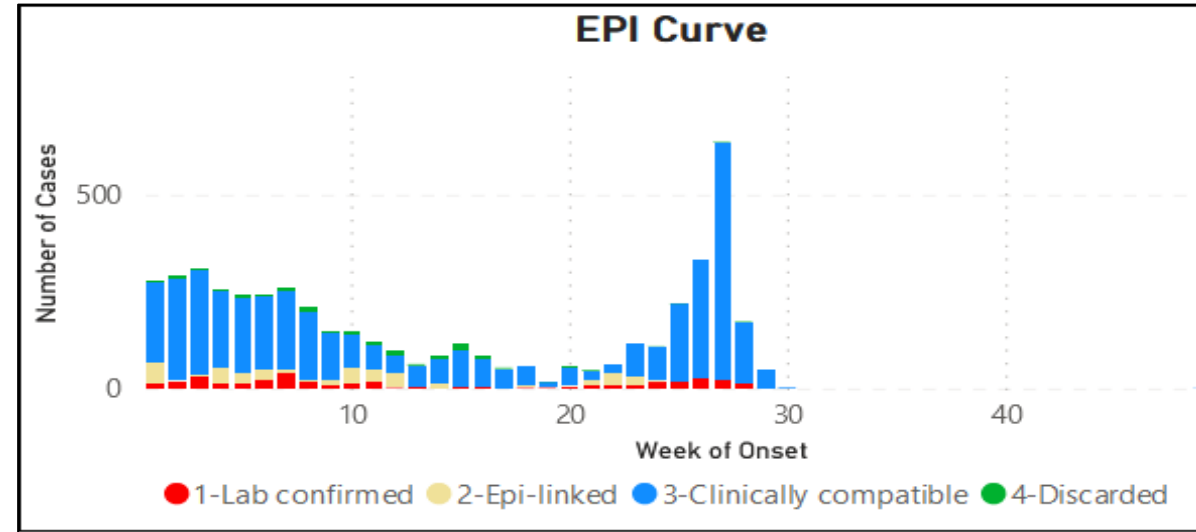
Epi Summary

- A total of sixty-eight (68) counties across all 10 States and Administrative areas have reported at least one suspected measles case since 2022
- In 2023, A total of 4,898 with 90 related deaths have been reported with a CFR of 1.85%
- Majority of cases 46% are in children less than 5 years of age
- Of all the under 5 years of age vaccinated, only 24% reported to have been vaccinated before
- Measles follow-up campaign conducted in April and May 2023 in all counties with a coverage of 92% and Post campaign evaluation (PCE 85%)
- Mop-up campaign conducted in five counties in three states of Unity, Upper Nile, and Northern Bahr el Ghazal) with coverage of above 100% targeted children aged 6 months to 15 years
- Nine counties have confirmed outbreak after week 25
- More than 20 counties targeted for Mop up/Reactive campaign, with 7 having some committed funding.

Vaccination plan

- To vaccinate 643,955 children through Mop-up and outbreak reactive vaccination strategies with MCV to interrupt the transmission of measles virus among both local and returnees' children aged 6 months to 14 years.
- To vaccinate on average 2250 returnees and refugees/day at points of entrance, based on the current number of persons crossing the Renk and other POE daily

Epi curve of measles cases from week 1 to 30, 2023, South Sudan



Counties selected for Measles reactive and Mop up campaign July 2023

State	County Name	MFUP campaign Coverage		Indicator for Measles Mop up and reactive campaign				Comment
		Administrative	PCE survey	Low Admin Coverage	Low PCE Coverage	Active transmission of Measles from (EPI wk 24)	Border with Sudan	
Abyei Administrative Area	Abyei	49%	90%	Yes	No	No	Yes	Very low administrative coverage due to inadequate vaccine and supply during the campaign and bordering with Sudan
Central Equatoria State	Juba	79%	34%	Yes	Yes	Yes	No	Low Administrative and PCE coverage due missed areas in the county including POCs and IDPs, Active transmission (3 cases)
Eastern Equatoria	Ikotos	79%	79%	Yes	Yes	No	No	Low Admin and PCE coverage of the last MFUP campaign
	Lapon	64%	75%	Yes	Yes	No	No	Low Admin and PCE coverage of the last MFUP campaign
Jonglei	Ayod	57%	68%	Yes	Yes	Yes	No	Low admin and PCE coverage of the last MFUP campaign, Activ transmission (2 cases)
	Fangak	70%	55%	Yes	Yes	Yes	No	Low admin and PCE coverage of the last MFUP campaign, Activ transmission (3 cases)
Lakes	Yirol East	96%	77%	No	Yes	Yes	No	Low PCE coverage of the last MFUP campaign, Activ transmission (3 cases)
Unity	Leer	88%	64%	Yes	Yes	Yes	No	Low admin and PCE coverage of the last MFUP campaign, Activ transmission (13 cases)
	Rubkona	106%	76%	No	Yes	Yes	Yes	Low PCE coverage of the last MFUP campaign, Activ transmission (7 cases), Border with Sudan
	Pariang	97%	85%	No	No	No	Yes	Borde with Sudan
	Mayom	138%		No	No	No	Yes	Borde with Sudan
Upper Nile	Fashoda	53%	NA	Yes	No	No	Yes	Low Administrative coverage of the last MFUP campaign and border with Sudan
	Malakal	66%	48%	Yes	Yes	No	Yes	Very low admin and PCE coverage and temporary transit point for returnees and refugees.
	Melut	98%	NA	No	No	Yes	Yes	Temporary transit point for returnees and Active transmission (2 cases)
	Manyo	85%	NA	No	No	No	Yes	Borde with Sudan
	Maban	71%	82%	Yes	No	Yes	Yes	Low Administrative coverage of the last MFUP campaign, Active transmission (5 cases) and border with Sudan
	Longechuk	111%	NA	No	No	Yes	Yes	Active transmission of lab confirmed Measles and border with Sudan
	Maiwut	102%	NA	No	No	No	Yes	Borde with Sudan
	Renk	69%	67%	Yes	Yes	Yes	Yes	Active transmission and border with Sudan. Measles Mop up campaign implemented
Warrap	Tonj South	93%	42%	No	Yes	No	No	Very low PCE coverage in the last MFUP campaign
	Gogrial West	127%	83%	No	No	Yes	No	Active transmission (10 cases)
Western Equatoria	Mundri East	75%	75%	Yes	Yes	No	No	Low admin and PCE coverage of the last MFUP campaign
	Yambio	81%	67%	Yes	Yes	No	No	Low PCE coverage of the last MFUP campaign and Active transmission (1 case)
Total	23							

Public health interventions

Mop up campaign results

State	County	Measles					Polio				
		Target	Host	Returnee	Total	Coverage (%)	Target	Host	Returnee	Total	Coverage (%)
NORTHERN BAHIR EI GHAZAL	AWEIL EAST	2325	1992	386	2378	102	2428	397	81	478	20
	AWEIL NORTH	191	334	265	599	314	200	473	313	786	393
	AWEIL WEST	2475	659	2520	3179	128	2585	701	2042	2743	106
UNITY	RUBKONA	4190	6494	2684	9178	219	4376	3814	1461	5275	121
UPPER NILE	RENK	52993	40518	9753	50271	95	55348	44163	10625	54788	99
Total		62174	49997	15608	65605	106	64937	49548	14522	64070	99

Measles Updates: CHALLENGES and Way forward

Challenges

- Inadequate detailed investigation of suspected measles cases and deaths in counties reporting
- Inadequate sample collection for laboratory confirmation and classification cases of suspected measles cases
- A high proportion of unvaccinated/unknown status children (75%) was detected among the cases, noting routine immunization gaps.
- Inadequate vaccination at POEs where returnees/refugees enter South Sudan
- Delay in measles samples testing.

Way forward

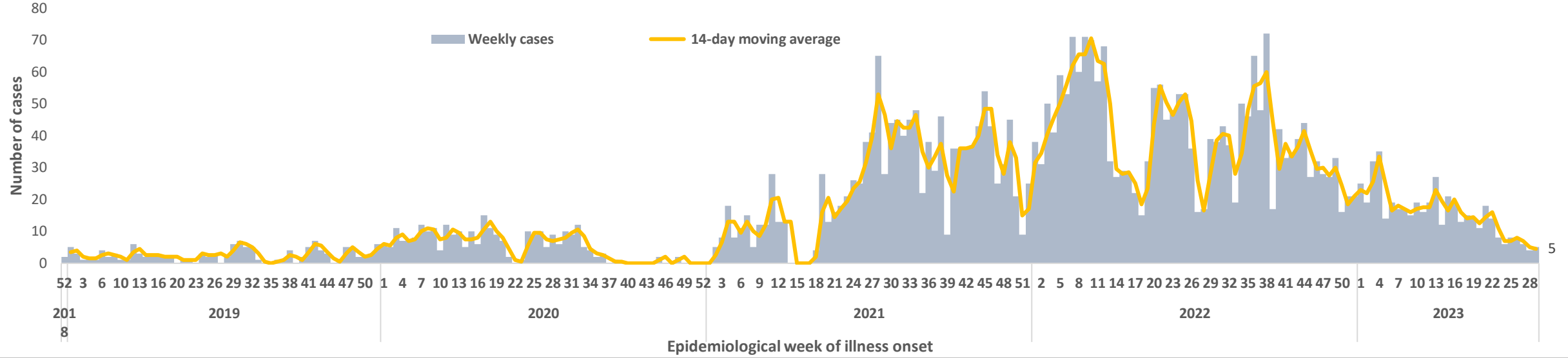
- Fast track campaigns in areas with secured funding working with procurement, logistics, and finance team
- Continue to discuss with partners to cover prioritized counties
- Finalize the GAVI Sudan crisis application
- Work with IOM on the POE vaccination

ACTIVE OUTBREAKS AND PUBLIC HEALTH EVENTS

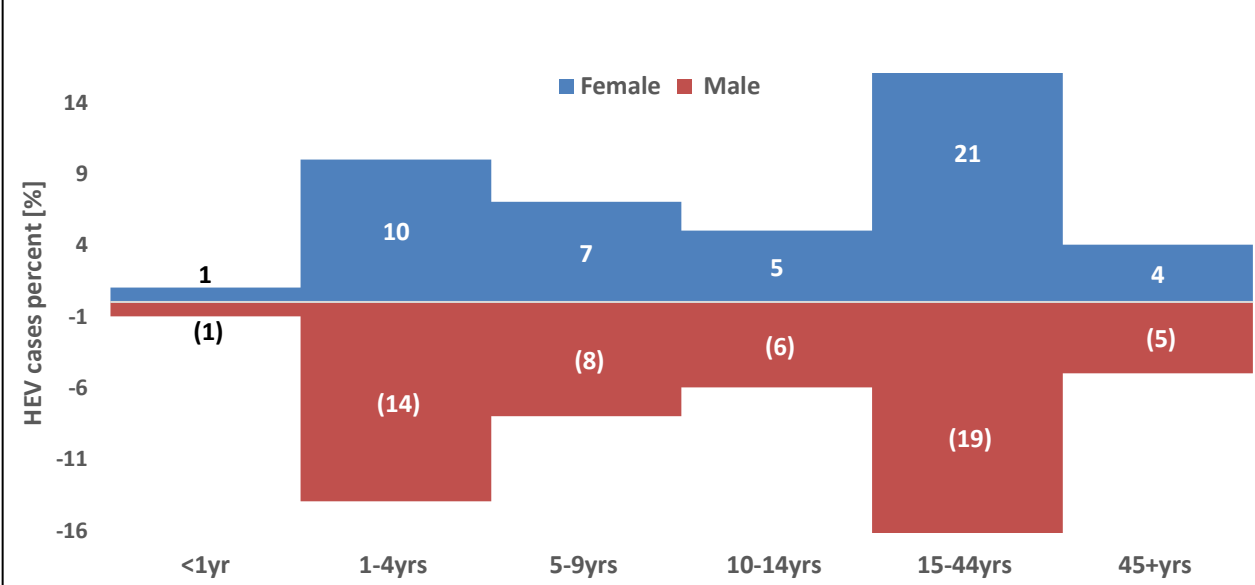
HEPATITIS E - UPDATES

Hepatitis E Virus/AJS updates Bentiu.

Hepatitis E Virus [HEV] cases in Bentiu IDP camp, wk 1, 2019 to wk 29, 2023

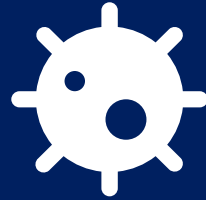


HEV case distribution by age and sex in Bentiu IDP, 2019-2022



- Total of 4, 253 cases and 27 deaths have been reported since the onset of the outbreak.
- Five AJS cases were reported in week 30
- People in the age range of 15 – 44 years are the most affected age group.

COVID-19 UPDATES

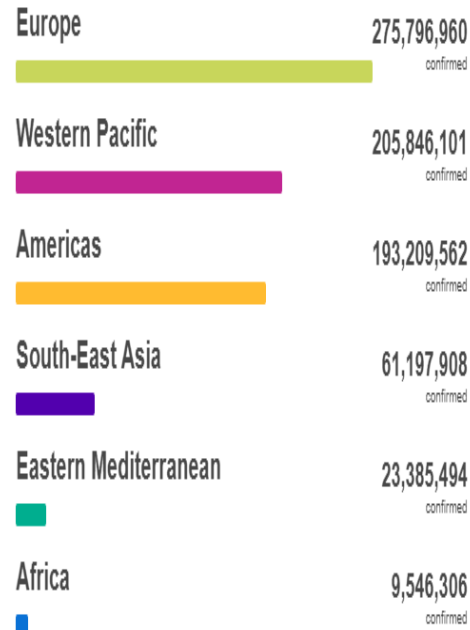




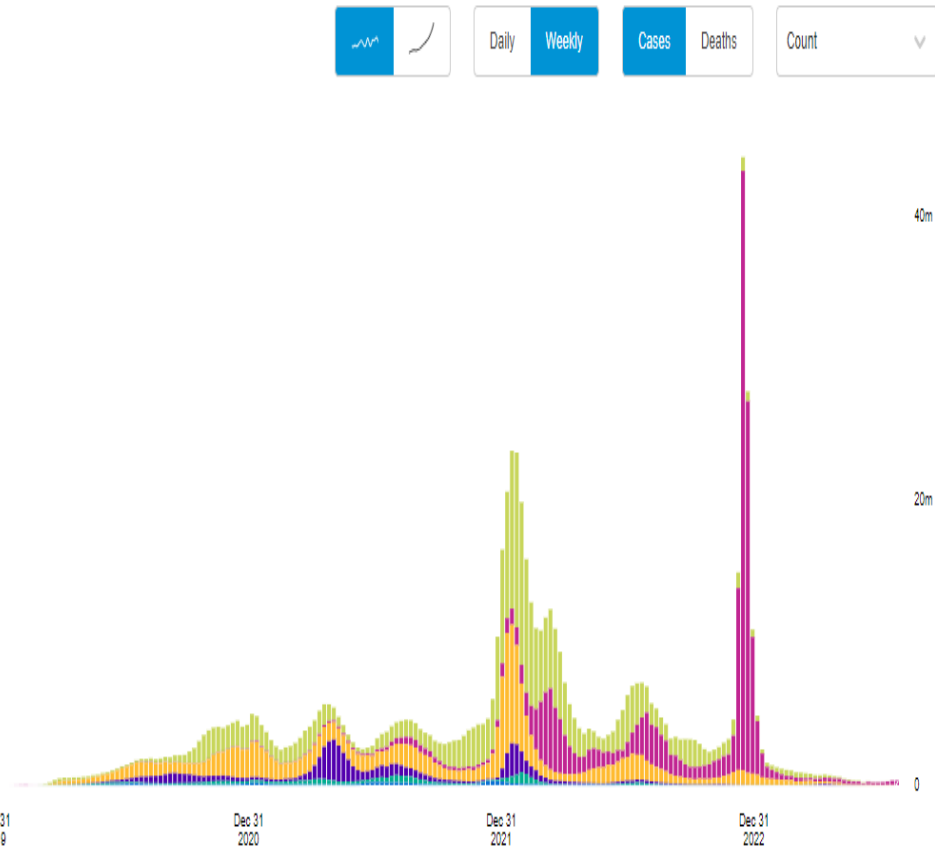
Situation update as of 2 August 2023

- Globally, as, 2 August 2023,** there have been **768,983,095** confirmed cases of COVID-19, including **6,953,743 deaths**, reported to WHO. As of 6 August 2023, a total of **13,492,225,267 vaccine** doses have been administered.
- In Africa,** as of 31 May 2023 there have been **9,546,306** confirmed cases of COVID-19, including **175,418 deaths** reported to the WHO
- In South Sudan,** from **3 January 2020 to 2 August 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.

Situation by WHO Region



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



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



HUMANITARIAN RESPONSE

SUDAN CRISIS

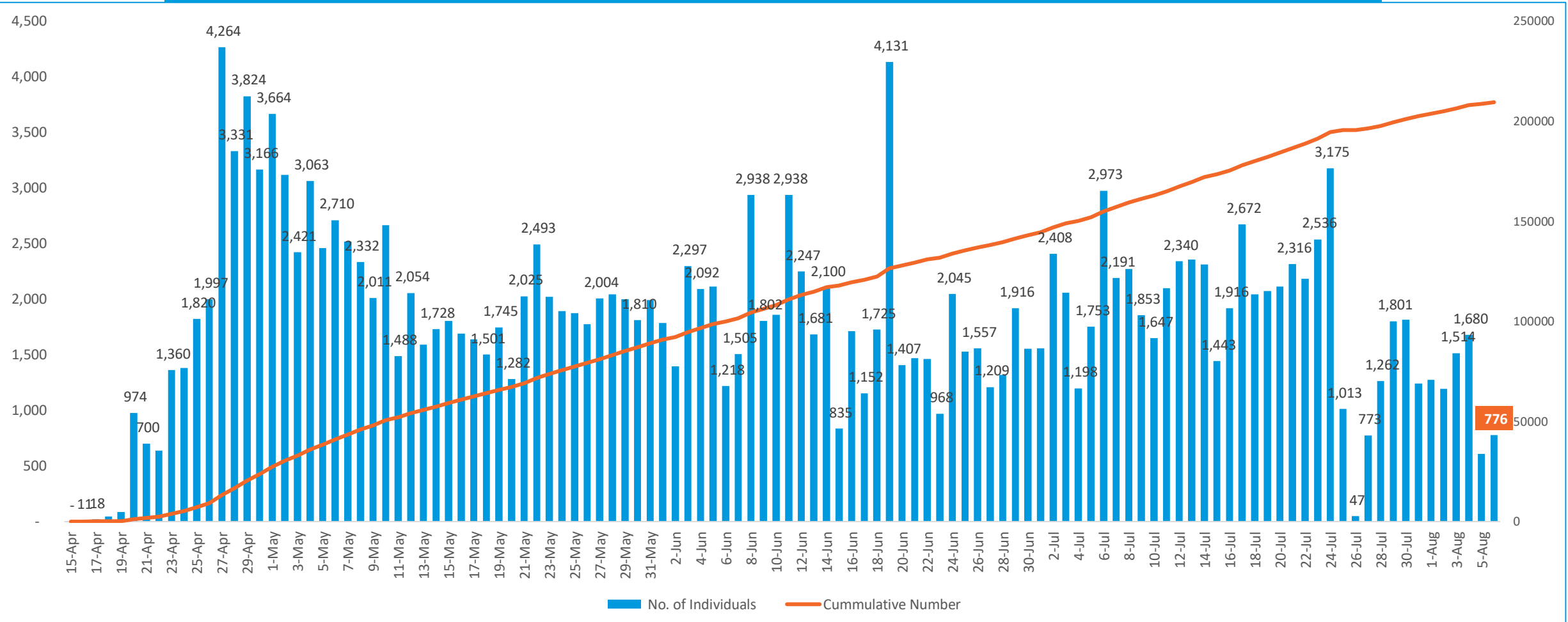


Sudan Crisis response: Main Highlights



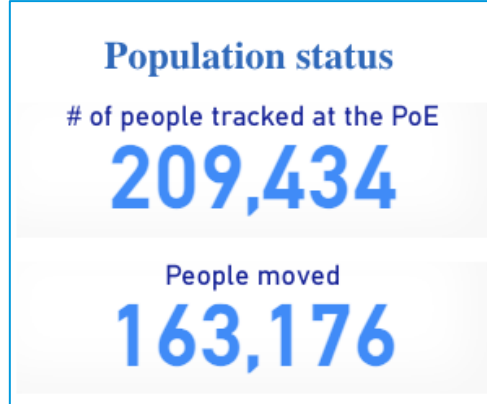
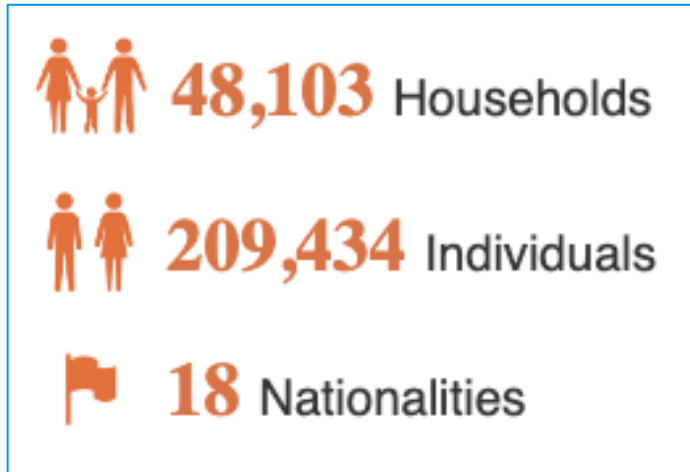
- As of 7 August July, South Sudan has received **209,434 individuals (48,103 households)** have entered South Sudan from **16 points of** entry along the border with Sudan since 16 April 2023.
- More than 91% (190,818) of these arrivals are South Sudan returnees. The rest are refugees from at least 16 other different countries, including Sudan
- The Ministry of Health and World Health Organization country office coordinates all the humanitarian health responses for the returnees and refugees coming into South Sudan.
- In week 30, 2023, Malaria remains the top cause of morbidity, with 38% followed by ART 23% in Renk, 34% followed by 22% AWD in Palouch, and 23% followed by 22% ART in Rotriak Unity state.
- Measles cases continue to be reported in all the counties receiving returnees from Sudan, leading to the prioritization of all the affected counties to conduct a mop-up/reactive campaign for all children aged 6 months to 15 years old
- MoH with support from WHO trained 27 healthcare workers from Renk Civil Hospital on Non-communicable disease kits donated by WHO to the partners
- WHO has so far distributed 685 inter-agency emergency health kits (IEHKs) in 6 priority locations to support returnees and refugees, enough to benefit 217,950 individuals. Kits issued were mainly; IEHK, Pneumonia, Cholera Investigation & treatment Kits, SAM/MC kits, and field sample collection kits, and NCD kits. Other supplies include Snake Venom antisera & SARS COV-2 Ag RDTs
- WHO and the Ministry of continue to conduct water quality testing in the transit center
- MoH and WHO deployed a qualified nurse in the Renk stabilization center to mentor staff on managing SAM cases with medical complication

Border Points Reporting as of 06 August 2023

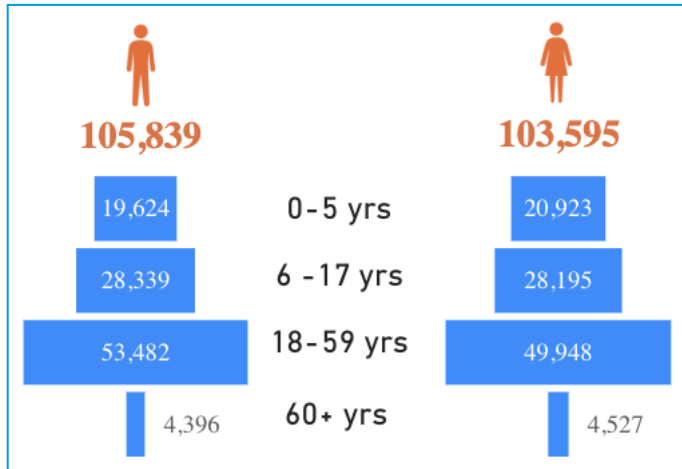


- 776 individuals arrived in South Sudan on 6 August 2023
- Cumulatively: 209,434 individuals (48,103 households) have entered South Sudan.
- This trend is averaging 1,853 individuals a day for the past 113 days.

• Key Figures

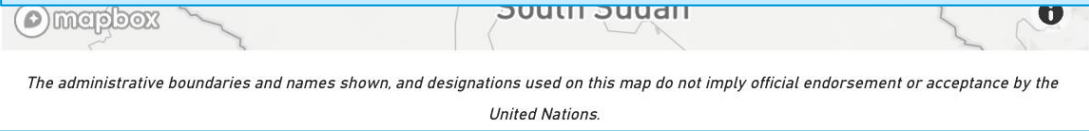


Sex and Age Breakdown



Points of Entries

- Movement for 209,434 individuals has been tracked from various PoEs, 161,980 in Joda alone.
- 161,176 people have been moved.
- The government has assisted the movement of 19% of individuals, humanitarian agencies assisted 67% move, 14% self-organised their movements, and 0.3% were moved by assistance through third-country nationalities.
- 87% of the onward movement was from Wunthou/Joda in Renk, Upper Nile State, 12% moved from Panakuch in Unity State, and 1.2% moved from Kiirr Adem in Unity State





**OVERALL
CONCLUSIONS AND
RECOMMENDATIONS**



- In week 30, **2023**, the IDSR reporting timeliness and completeness in the EWARN sites are below the target of 80%
- A total of 145 alerts were triggered in **week 30, 2023**, and most of the alerts were for measles 25.5% (34/145), **malaria, 22.7% (27/145)**, and AWD 13.2% (34/145),
- Highlights on the outcome of the Intra Action Review (IAR) conducted by the Ministry of Health and partners on the ongoing response in Dajo, Longechuk county
- Measles scale-up response (reactive/mop-up campaigns) plan to be conducted in additional 22 prioritized counties as of July 2023
- As of 7 August July, South Sudan received 209,434 individuals (48,103 households) have entered South Sudan since 16 April 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 response strategy in the reception sites for returnees/refugees' influx due to the Sudan crisis

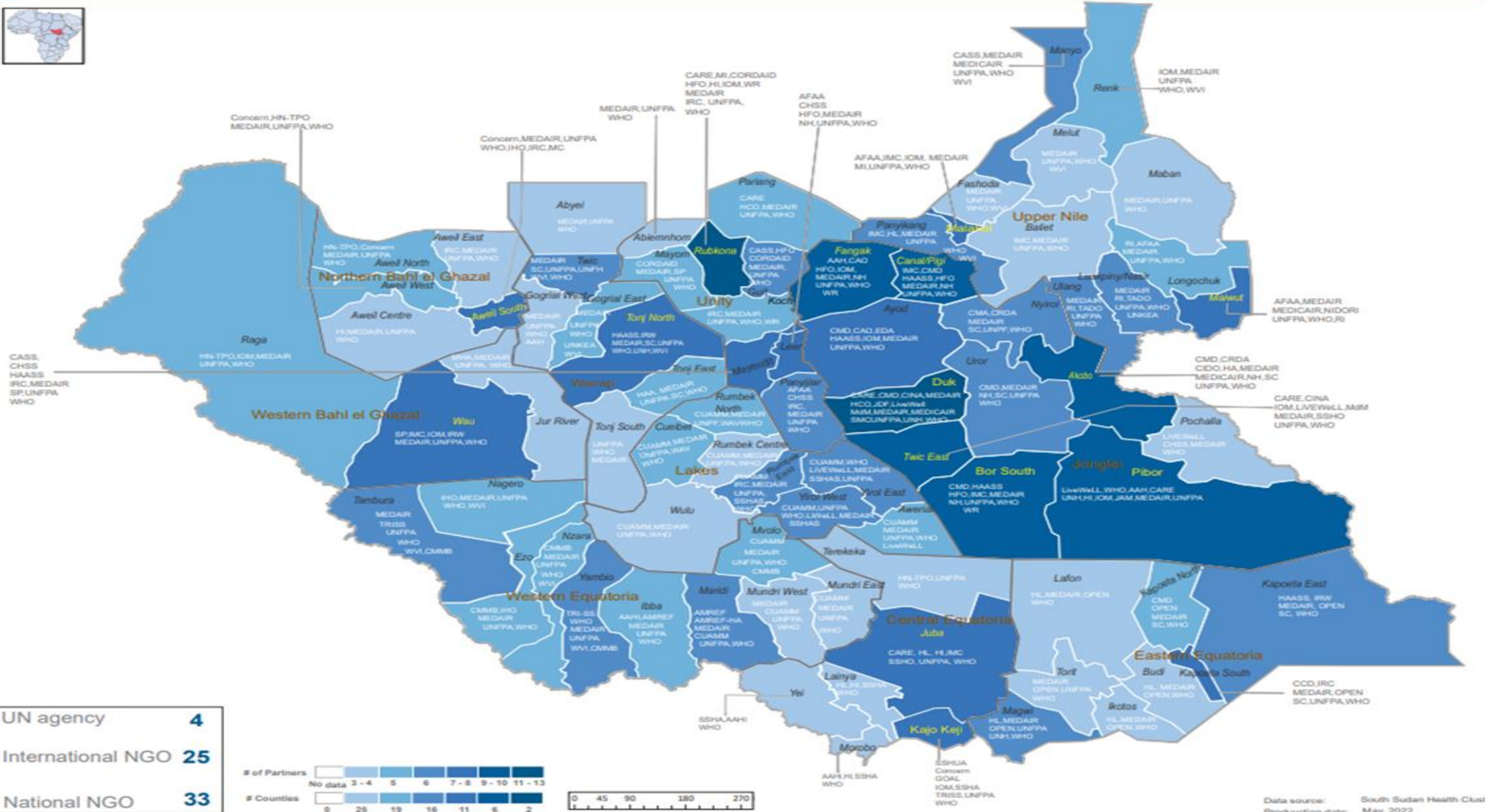


IDSR timeliness & completeness performance at the county level for weeks 30 and 29 of 2023 (2)



STATE	COUNTY	Implementing Partners	Total Numer of Functional Health Facilities	No. of HF's Reported on Time in WK 30	Percentage of Timeliness in WK 30	No. of HF's Reported regardless of time in WK 30	Percentage of Completeness in WK 30	No. of HF's Reported regardless of time in WK 29	Percentage of Completeness in Wk 29	STATE	COUNTY	Implementing Partners	Total Numer of Functional Health Facilities	No. of HF's Reported on Time in WK 30	Percentage of Timeliness in WK 30	No. of HF's Reported regardless of time in WK 30	Percentage of Completeness in WK 30	No. of HF's Reported regardless of time in WK 29	Percentage of Completeness in Wk 29
Jonglei	Ayod	CMA,MEDAIR	13	13	100%	13	100%	13	100%	Warrap	Tonj East	SCI, Amref-CCMF TADO	12	12	100%	12	100%	12	100%
EES	Kapoeta South	Amref-CCMF	9	9	100%	9	100%	8	89%	Warrap	Tonj North	HAASS,WVI, Amref-CCMF IRW	15	15	100%	15	100%	15	100%
GPAA	Pibor	ForAfrika, Medair	8	8	100%	8	100%	6	75%	Warrap	Tonj South	Amref-CCMF	12	12	100%	12	100%	12	100%
GPAA	Pochalla	ForAfrika	7	7	100%	7	100%	0	0%	Upper Nile	Baliet	IMC,CRES-Aid CONSERN, HL	5	5	100%	5	100%	5	100%
Jonglei	Bor	Medicair CRSF, CARE LiveWellSS	19	18	95%	18	95%	18	95%	Upper Nile	Panyikang	CRES-Aid, HL	2	2	100%	2	100%	1	50%
EES	Torit	ORDAID, OPEN	11	10	91%	10	91%	11	100%	Upper Nile	Maban	RI	19	18	95%	19	100%	17	89%
EES	Lopa Lafon	HLSS	15	13	87%	13	87%	13	87%	Upper Nile	Fashoda	CORDAID	12	11	92%	11	92%	12	100%
EES	Kapoeta East	IRW, Amref-CCF	7	6	86%	7	100%	7	100%	Warrap	Gogrial West	GOAL	31	26	84%	26	84%	25	81%
Jonglei	Duk	MdMS, CARE, SMC,Medicair,	13	11	85%	11	85%	11	85%	Upper Nile	Akoka	IMC	5	4	80%	4	80%	4	80%
EES	Magwi	HLSS	19	16	84%	19	100%	19	100%	Upper Nile	Renk	WVI	13	10	77%	11	85%	12	92%
EES	Ikotos	HLSS	19	16	84%	17	89%	14	74%	Warrap	Twic	GOAL	28	21	75%	21	75%	27	96%
EES	Budi	HLSS	17	12	71%	14	82%	13	76%	Warrap	Gogrial East	GOAL, UNKEA HFO	15	11	73%	12	80%	14	93%
Jonglei	Canal Pigi	IMC, CRESA	13	9	69%	9	69%	5	38%	Upper Nile	Ulang	GOAL, UNKEA, RI MSF-E	9	6	67%	6	67%	0	0%
Jonglei	Fangak	Medair, WR, HFO AAH,CMD,IOM,MSF	22	15	68%	15	68%	14	64%	Upper Nile	Makal	IOM, IMC,MSF-E	9	6	67%	6	67%	5	56%
EES	Kapoeta North	Amref-CCMF	10	5	50%	7	70%	10	100%	Upper Nile	Manyo	CORDAID,CASS, SPEDP	15	7	47%	8	53%	4	27%
Jonglei	Nyirrol	CMA	2	1	50%	1	50%	1	50%	Upper Nile	Maiwut	NIDO	11	4	36%	6	55%	9	82%
Jonglei	Uror	CMA,MEDICAIR	8	1	13%	1	13%	1	13%	Upper Nile	Luakpiny Nasir	UNKEA RI	10	3	30%	8	80%	8	80%
Jonglei	Akobo	CIDO,MEDICAIR,SCI	15	1	7%	7	47%	6	40%	Upper Nile	Melut	WVI	9	1	11%	1	11%	1	11%
Jonglei	Twic East	IOM,CARE,SMC	9	0	0%	0	0%	0	0%	Upper Nile	Longechuk	NIDO	15	0	0%	8	53%	9	60%

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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