

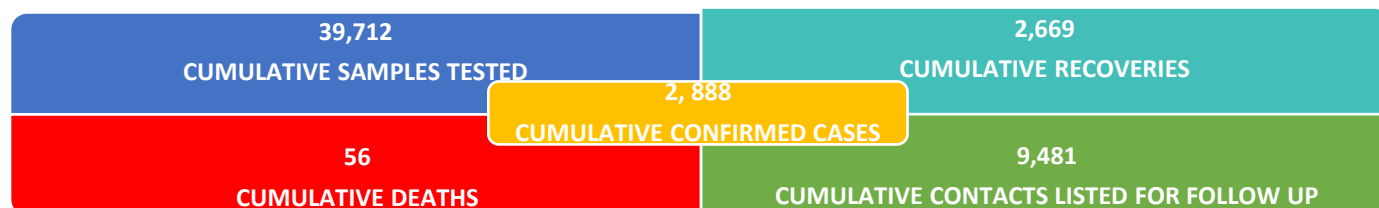


PUBLIC HEALTH EMERGENCY OPERATIONS CENTRE (PHEOC)

COVID-19 WEEKLY SITUATION REPORT

Issue NO: 34

Reporting Period: 19-25 October 2020 (week 43)



1. KEY HIGHLIGHTS

- A cumulative total of 2,888 cases have been confirmed and 56 deaths have been recorded, with case fatality rate (CFR) of 1.9 percent including 215 imported cases as of 25 October 2020.
- 2 cases are currently isolated in health facilities in the Country; and the National IDU has 99% percent bed occupancy available.
- 2, 669 cases (0 new) have been discharged to date.
- 136 Health Care Workers have been infected since the beginning of the outbreak with one death.
- 9,481 cumulative contacts have been registered of which 8,884 have completed the 14-day quarantine. Currently, 597 contacts are being followed, of these 57.5 percent (n=343) contacts were reached.
- 722 contacts have converted to cases to date; accounting for 25.0 percent of all confirmed cases.
- Cumulatively 39,712 laboratory tests have been performed with 7.3 percent positivity rate.
- There were cumulative total of 1,409 alerts of which 86.5 percent (n=1, 220) have been verified and sampled; Most alerts have come from Central Equatorial (74.9 percent), Eastern Equatoria (4.3 percent); Upper Nile State (3.4 percent) and the remaining 17.4 Percent from the other States and Administrative Areas.
- As of 25 October, 24 Counties (30.0 percent) out of 80 Counties of ten States of South Sudan are affected (figure 4).

2. BACKGROUND

- South Sudan confirmed its first COVID-19 case on 5 April 2020. To date 2,888 cases have been confirmed out of 39,712 tests performed by the National Public Health Laboratory (NPHL) and other decentralized Public Health Laboratories Networks in Nimule, Bor, and Malakal and UN clinics in Juba with 2, 669 recoveries and 56 deaths, yielding the case fatality rate (CFR) of 1.9 percent. Up to 7.4 percent (n=215) confirmed cases were imported. South Sudan is classified as having clusters of transmission in general and community transmission in Juba, the capital city.

3. EPIDEMIOLOGY AND SURVEILLANCE

Descriptive epidemiology

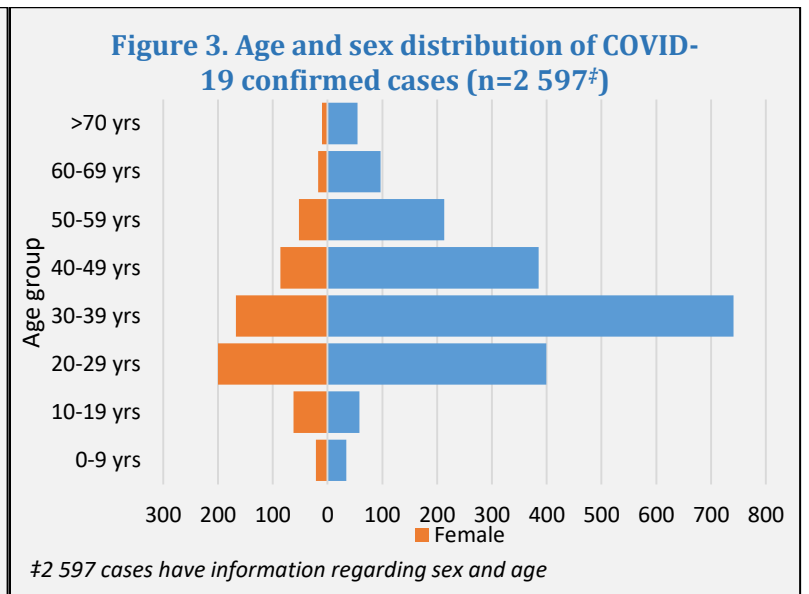
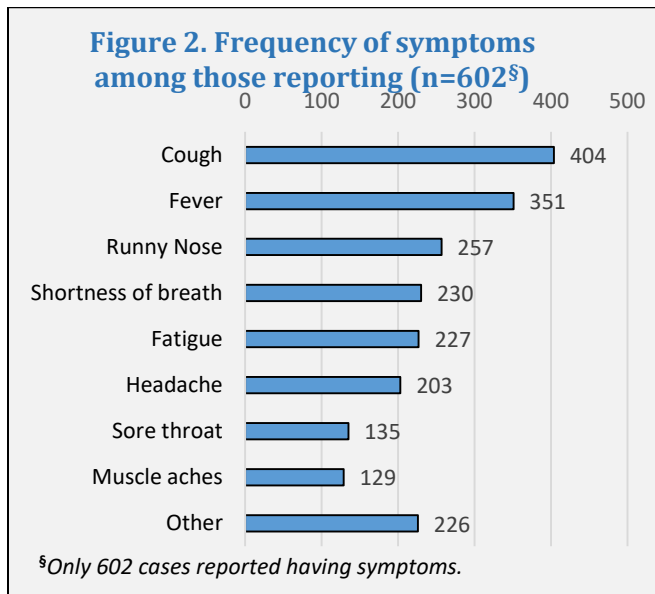
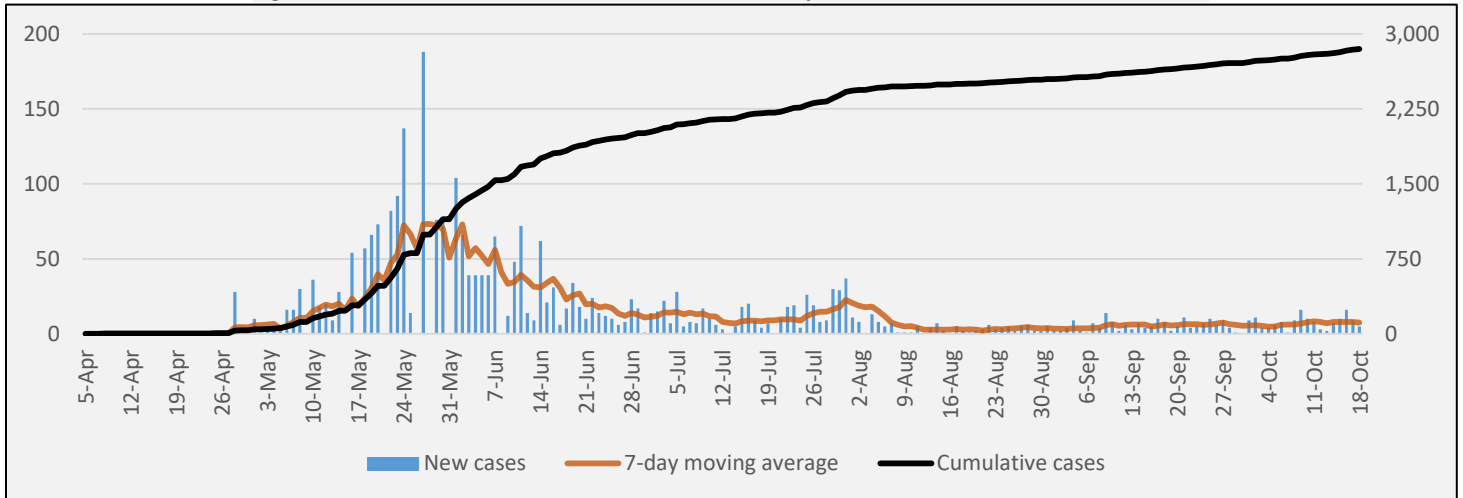
- This report includes analysis for 2,888 cases the Public Health Emergency Operation Centre (PHEOC) has line listed as confirmed cumulative cases. There are 2,669 recoveries and 56 deaths with case fatality rate (CFR) of 1.9 percent. Cases detected among South Sudanese nationals accounted for (79 percent) of all cases, whereas (12 percent) are foreigners and 9 percent unknown. There have been 215 imported cases (9 new) registered to date coming mostly from Kenya (17), Uganda (32), Eretria (4), DRC (2), Somalia (1) and South Sudanese returnees 78), and 71 unknown.
- Confirmed cases range from 2 months - 90 years of age with an average of 36.5 years. In terms of for gender, 72.5 percent of confirmed cases were diagnosed in men, 23.5 percent in women, and 4.1 percent unknown. Young men within the 30-39 age group are the most at risk for COVID-19. The majority of cases have been diagnosed in asymptomatic patients, though 602 (21 percent) cases reported having experienced symptoms.
- Only 21.0 percent (n=602) cases reported symptoms, of which the most frequent have been cough (404), fever (351) , runny nose (257) , shortness of breath (230), fatigue (227) , headache (203) , sore throat (135), muscle aches (129), and others (226).



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- New and cumulative; frequency of symptoms; age, sex; and geographical distribution of COVID-19 confirmed cases are shown in figures 1, 2, 3 and 4 respectively.
- As of 25 October 2020, the affected Counties alphabetically are: Abyei (52), Aweil Center (8), Aweil East (5), Baliet (1), Ikotos (5), Juba (2,267), Maban (7), Magwi (3), Malakal (84), Nyirol (26), Rubkona (10), Rumbek North (1), Rumbek Center (22), Rumbek East (1), South Bor (32), Tonj North (1), Torit (40), Twic Warrap (3), Twic East (2), Uror (2), Wau (29), Yambio (7), Yei (23), Yirol West (1), Unknown (10).

Figure 1: New and cumulative confirmed COVID cases by notification date as of 25 October 2020

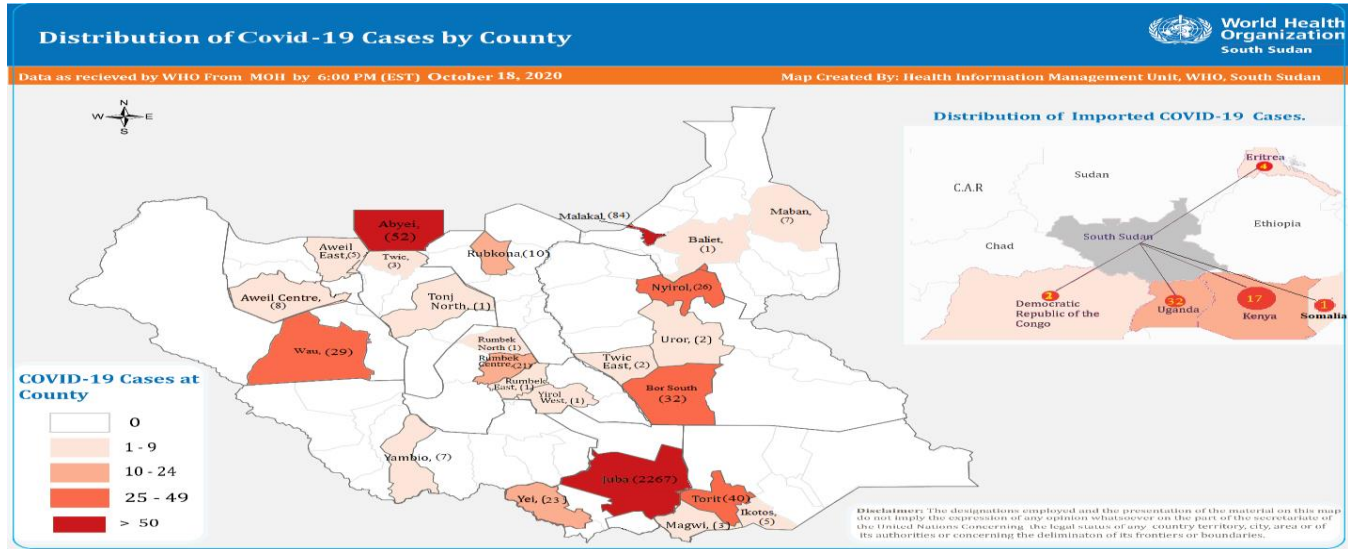


Contact tracing summary

- As of 25 October 2020, the total number of contacts (old and new) that have been monitored has reached **9,481**. Out of these 93.7 percent (n=8,884) contacts have completed 14-day quarantine period.
- Currently, 597 contacts are being followed of these 57.5 percent (n=343) contacts were reached.
- 722 contacts have converted to cases thus far; accounting for 25.0 percent of all confirmed cases.



Figure 4: Distribution of confirmed COVID-19 cases according to Counties



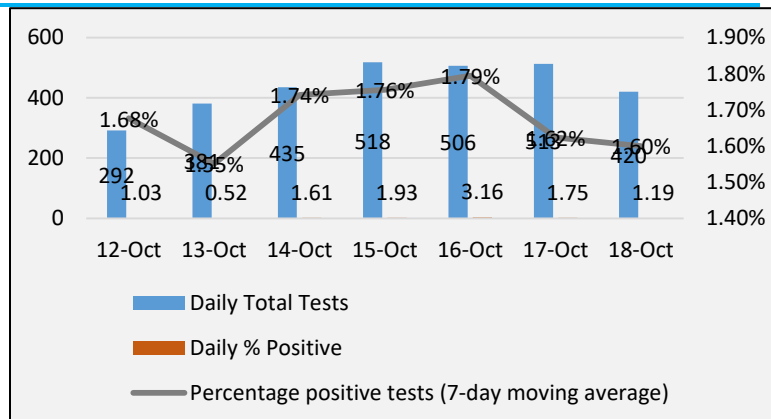
4. PUBLIC HEALTH ACTION / RESPONSE INTERVENTIONS

4.1 COORDINATION AND LEADERSHIP

- Coordination is ongoing in the Country through different architectures at National, States and County levels: National Task Force (NTF) providing high level strategic decisions; the National Steering Committee (NSC) providing both strategic and operational decisions/ guidance; the Technical Working Groups at both National and State levels; and the State Task Forces (STF), as well as County Committees (CC).
- The South Sudan Guidelines on COVID-19 was issued by Medical Advisory Panel (MAP) of the NTF. The Guides were then reviewed by the NSC members and the TWGs, and currently being updated by MAP and to be shared with wider audience.
- Ongoing COVID-19 Transitional Roadmap discussions by stakeholders including the NSC and the Inter-Agency Leadership Team for mainstreaming COVID-19 into other response and coordination structures aimed at strengthening incident management system in both the short and long terms for humanitarian and development activities.
- The COVID-19 intra-action workshop is planned for 26-28 October, with the overall objective to review the ongoing COVID-19 pandemic response and preparedness in South Sudan across different pillars, and to document the best practices and lessons learned to improve the ongoing response and preparedness. The workshop will be facilitated by MoH/PHEOC and WHO, with participation of SME stakeholders including NSC members, STF, TWG and partners.

4.2 LABORATORY

- Cumulative 39,712 samples tested as of 25 October 2020.
- Cumulative 2, 888 positive cases confirmed across the country with 7.3 percent positivity rate.
- South Sudan's daily testing average positivity proportions this reporting week is shown in figure 5. The trend line in gray shows the average percentage of tests that were positive over the last 7 days. The orange bars show the percentage of tests conducted each day that were positive.
- The second phase of GeneXpert decentralization for COVID-19 testing has been complete in the following sites: Awiel, Yirol, Makpondu, and Nzara. The third phase is planned to cover mostly the bordering sites of Renk, Agok





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in Abyei, Kuajok, and other sites.

- The draft Protocol for the Ag-RDT for COVID-19 testing has been released for review by partners including SME from MoH, CDC, and WHO.

4.3 SURVEILLANCE

- Epi-Surveillance and BH/POE TWGs drafted a road map for integrating testing at Abyei and Renk points of entry. Assessment mission is planned for the period 3-5 November to ascertain functionality and additional need for PoEs.
- The TWG collaborated with Laboratory, Case Management, and Coordination pillars to develop recommendations for deployment and use of COVID-19 Rapid Diagnostic Test (RDTs) in South Sudan. Further guidance is being explored on use.
- Household transmission investigation continues, with 41 cases and household contacts enrolled in Lakes State (Rumbek), Jonglei State (Bor), CES (Terekeka, Rajaf), and EES (Nimule) until 30 November. Oral and nasal swabs, blood specimens, and in-depth interviews of those enrolled will continue over the course of four visits for the duration of the investigation.
- The health worker retrospective investigation that examines frontline health worker exposures and testing was closed on 18 October. Preliminary results are due by 9 November.

4.4 CASE MANAGEMENT

- Among suspected cases recorded this week at the Juba John Garang IDU, 02 tested positive and were managed at the IDU for COVID-19, while 01 case was a carried forward patient from late last week making a total of 03 admissions; 02 of the cases were discharged including 01 death; while. At State level, 01 admission was recorded in Bentiu COVID-19 facility, and nil admission reported in other COVID-19 facilities.
- Currently there are 20 functional COVID-19 facilities in the Country; and cumulative 302 functional triage facilities for COVID-19 countrywide; while 17 facilities for referral systems were targeted, to date 11 have been reached attributed to funding challenges for the procurement of ambulances.
- Emergency Medical Team conducted assessment to Juba Teaching Hospital and the IDU for setting up of a critical care unit. Finding and recommendation to be shared in coming week.
- Supportive supervision was conducted at Wau COVID-19 facility and Protection of Civilian (PoC) sites by NGO IMC case management team.
- Ongoing distribution of Hygiene supplies and food item to patient under home-based care.

Medair Home Care Support System

- Active patients by COB 12/10: 22
- Discharged: 20

Total Reached (Alerts + confirmed cases)	Enrolled	Declined	Admitted to IDU at time of first call	Deceased at time of first call	Not qualified
23	91% (21)	9% (2)	0% (0)	0% (0)	0% (0)

Total Enrolled	Male	Female	Asymptomatic	Mild	Moderate	Severe
21	71% (15)	29% (6)	71% (15)	29% (6)	0% (0)	0% (0)

4.5 INFECTION PREVENTION AND CONTROL (IPC)

The TWG continues to support national and state level coordination with partners scaling up activities, and improved collaboration of integration of WASH services with RCCE, Health and Nutrition actors in health facilities, PoCs, and communities at risk. Based on reports received from 12 partners (UNHCR, UNICEF, IOM, ACTED, AHA, CEDS, IAS, IRC, NSDO, OXFAM, SP, WVI), below are achievements across the country.

- 304 out of 897 people (means 34 percent) observed to use handwashing stations on entering churches, health facilities and schools, markets, and other public places in Pauams county: Agoro, Magwi, Kapoeta, Rajaf (POCs), Kor-Al-Amer, Jin-Quarter, Jamjang, Nyalath, Baac, Madhol. More adherence to handwashing observed at health facilities.
- 20 out of 100 people (means 20 percent) who received a face mask and actually wear it during sensitization activities Organised by NSDO hygiene promoters in Rajaf (PoCs) Payam in Juba County (CES) and in Kor-Al-Amer and Jin-Quarter payams in Maban County (GUN).
- 615 cloth face masks distributed in communities in Juba, Rajaf, Kator and Malakal.
- 261,027 people engaged and reached with integrated COVID-19 and hygiene promotion services across the country.
- 10,679 people reached with WASH facility upgrades through repairs, rehabilitation, and new construction in Rajaf (PoCs), Yambio, Malakal and Anackdiar.



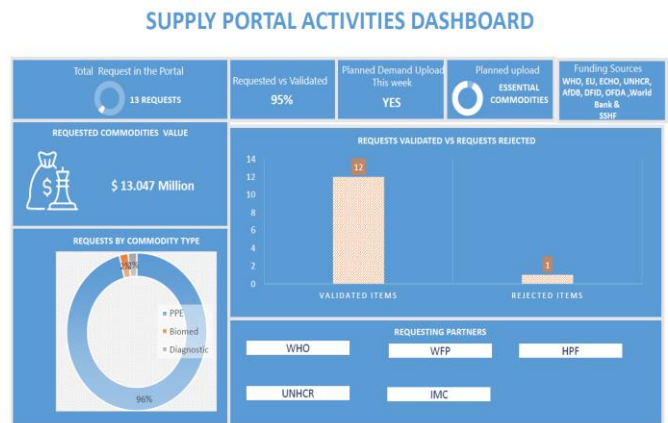
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- 682 hand washing stations installed in health facilities and communities and provided with soap or 0.05% chlorine solution in Maban, Pariang, Juba, Rubkhona, Malakal, Wau, Wau Airport, and Kapoeta South.
- 586 Health Workers and community WASH workers trained in IPC measures in Pariang, Pariang, Malakal, Magwi and Wau.
- 3 health facilities including COVID-19 treatment facilities supported with PPE and IPC supplies in Juba, Rajaf and Kator.
- 3 triage and screening area set up as per SOP in Juba, Rajaf and Bunj.

4.6 RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)- NTR

4.7 OPERATION SUPPORT AND LOGISTICS (OSL)

- Following the arrival of SSHF funded COVID-19 PPE commodities in South Sudan, WFP through the Logistics Cluster, and WHO, as co-leads of the Operational Support and Logistics Pillar, re-launched the Personal Protective Equipment (PPE) Common Request System, aiming at consolidating requests of in-country COVID-19 PPE commodities. During the reporting week, four requests were received from three organisations for four locations- WHO (Kajo Keji), UN Youth South Sudan (Magwi & Obbo) & Green Planet (Juba), and all approved by the Inter-Agency technical team on 21 October, totaling 10,064 PPE items allocated from the common pool.
- Between 19 and 23 October, ten COVID-19 samples were transported from four locations to Juba across South Sudan: Agok (1), Rubkhona (1) and Malakal (8).
- The movement of Rapid Response Team for COVID-19 related activities continues to be supported by the provision of 10 vehicles both in Juba and Nimule.



4.8 POINTS OF ENTRY (POE)

- 11,947 travelers underwent primary screening at various screening points in Juba/JIA-4,409, Wau- 1,093, and Nimule- 3,821, Wunthuo-Renk- 38, and Amiet-Abyei-2585 conducted by the International Organization for Migration (IOM). In addition, there are ongoing IPC, hygiene promotion, and risk communication & community engagement activities by various points of entry partners at the respective PoE locations.
- The POE TWG is currently updating the Standard Operating Procedures (SOPs) for border crossings and camp and camp like settings based on the updated Case Definition for South Sudan.



IOM Health promoter in Wunthuo PoE -Renk screening point. (Photo credit by Duop Tut).

5. MAJOR CHALLENGES

- Testing from the states where no testing facility is available, still problematic, (sample collection not done in a timely manner as well as transportation to Juba, compounded by poor motivation due to unpaid incentives for RRT).
- Contacts refusing to comply with quarantine measures or denying exposure with the case though they are known to be a contact.
- Funding challenges across pillars especially for case management and PoE. For the PoE pillar, continuous lack of funding for partners have resulted in four partners withdrawing from PoE activities in Yambio, Kajokeji and Abyei.
- Limited PPE availability for COVID-19 facilities and Triage points highlighted across all States.
- Despite the high level of knowledge registered, there still persistent low perception of risk among the population requiring regular advocacy by all stakeholders including NSC. Stigma reported against COVID-19 patients also discouraging new cases to seek for medical care.



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- Limited access and mobility to communities and health facilities due to heaving rains/ flooding, poor logistics, and insecurity. Also Protest by Youths in Upper Nile (Renk and Melut) interrupted some COVID-19 intervention including case management. Also, IPC TWG reported low monitoring and supportive field supervision -due to travel restrictions and low funding.

6. RECOMMENDATIONS AND PRIORITY FOLLOW UP ACTIONS

- Review and update of South Sudan COVID-19 Guidelines on COVID-19, and dissemination to wider audience.
- Revise and update the strategies for surveillance, testing, case management and contact tracing as the outbreak evolves.
- NSC take up the issue of distribution of VTMs and kits to the States and implementing partners so that they can actually implement the lab testing strategy and improve COVID-19 surveillance and testing rates across the Country.
- Establishment of remote meeting devices to the operational COVID-19 facilities for online experience sharing and trainings.
- Continue engagement with the National and State authorities for mitigation campaign aimed at reducing the risk of COVID-19 transmission during community events including funerals and wedding.
- Scale up risk communication and community engagement to address the stigma associated with COVID-19 in South Sudan especially with target groups of IDPs living in PoC camps and with community contacts observing quarantine in large households.

7. CONCLUSIONS

Ongoing coordination and collaboration amongst actors including National Task Force (NTF), National Steering Committee (NSC), State Tasks Forces (STFs), MOH/PHEOC and other government Ministries, agencies and departments is needed to strengthen the COVID-19 outbreak preparedness and response mechanisms. Ongoing update of the South Sudan Guidelines on COVID-19. Major funding gaps remains across all pillars.

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