South Sudan COVID-19 Weekly Epidemiologic Bulletin

Issue #: 05

2 – 8 November 2020

Epidemiologic Week 45

Summary statistics for Epidemiologic Week 45

47	2980	0	59	114	47020
New Confirmed Cases	Total Confirmed Cases	New Deaths	Total Deaths	New Contacts Under Follow-	Cumulative Samples Tested

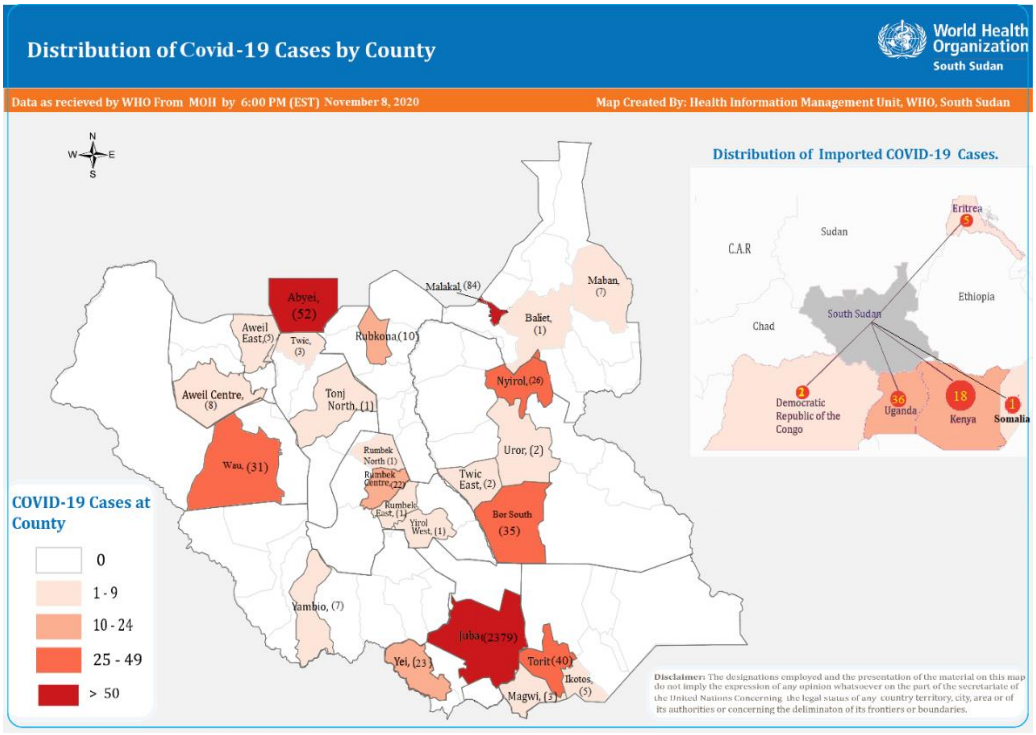


Figure 1. Map of cumulative reported COVID-19 cases by state. Map sourced from WHO weekly bulletin

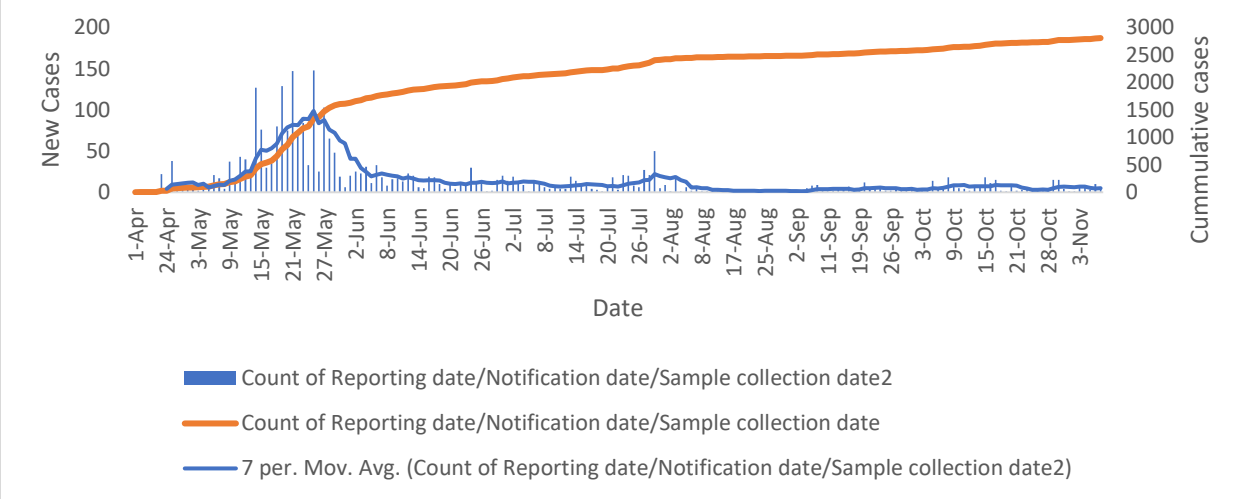


Figure 2. Epidemiological curve of reported cases through Week 45, showing new cases (blue bars), rolling 7-day average of reported cases (blue line), and total cumulative reported cases (red line)

Epidemiology and Surveillance Update

Forty-seven new cases were identified in Week 45, bringing the cumulative number of confirmed cases to 2980. The case curve has remained low and relatively flat since August [Fig 2]. Cumulatively, the age distribution of cases reported is skewed towards people under 50 years old with most cases occurring in the 20-49 age group and skewed heavily towards males [Fig 3]. Most cases reported their nationality as South Sudanese (75.5%) [Fig 4]. In Week 45, most positive cases were reported through travel screening [Fig 5A], although if cases are looked at cumulatively, most are sourced from contact tracing or alerts (36%) while only 8% are from travel screening. Again, almost all new reported cases this week were from CES (89%) [Fig 6].

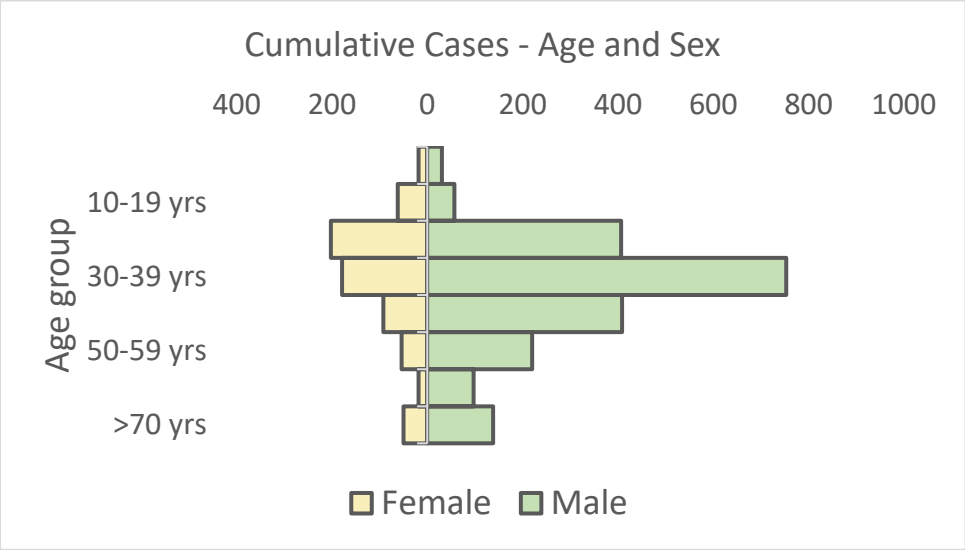


Figure 3. Distribution of cumulative reported cases by age and sex

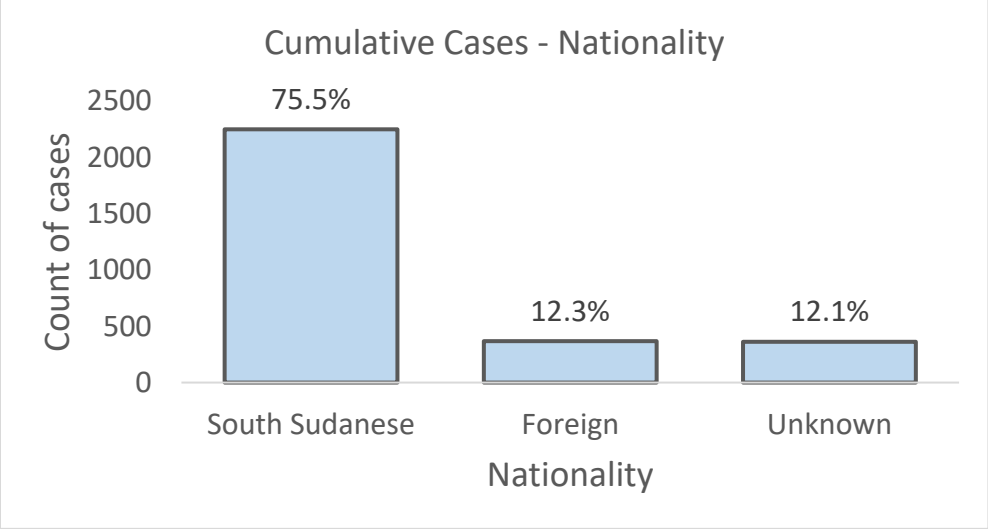
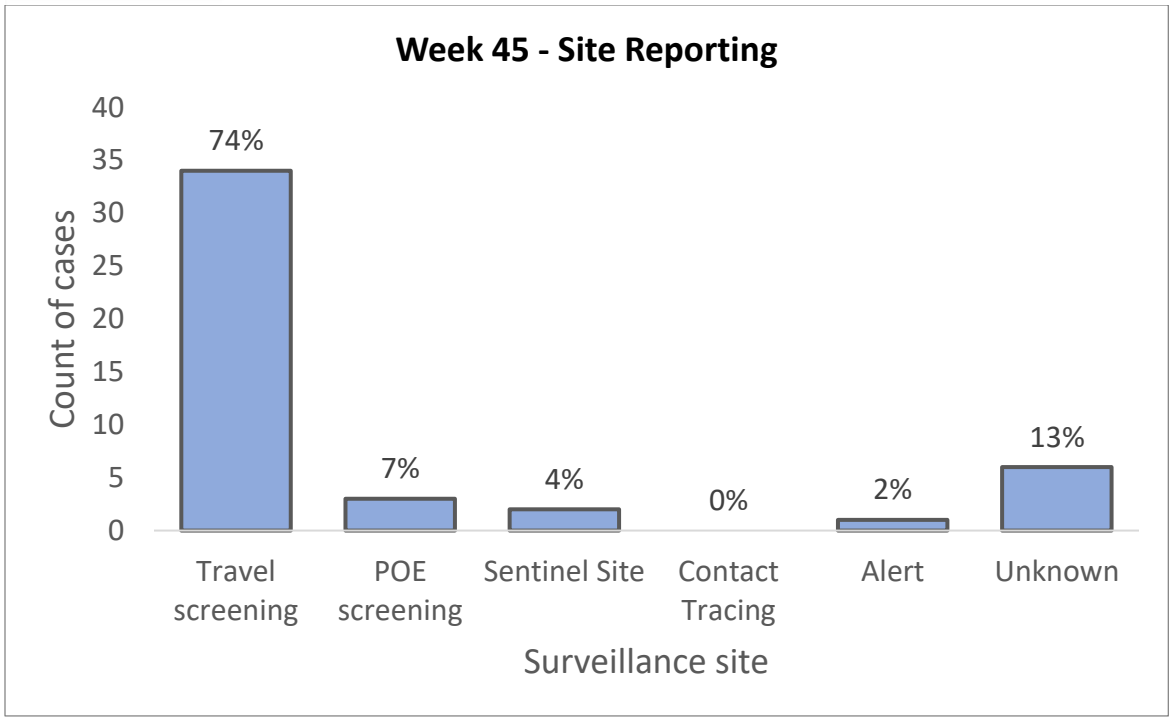


Figure 4. Distribution of cumulative reported cases by nationality



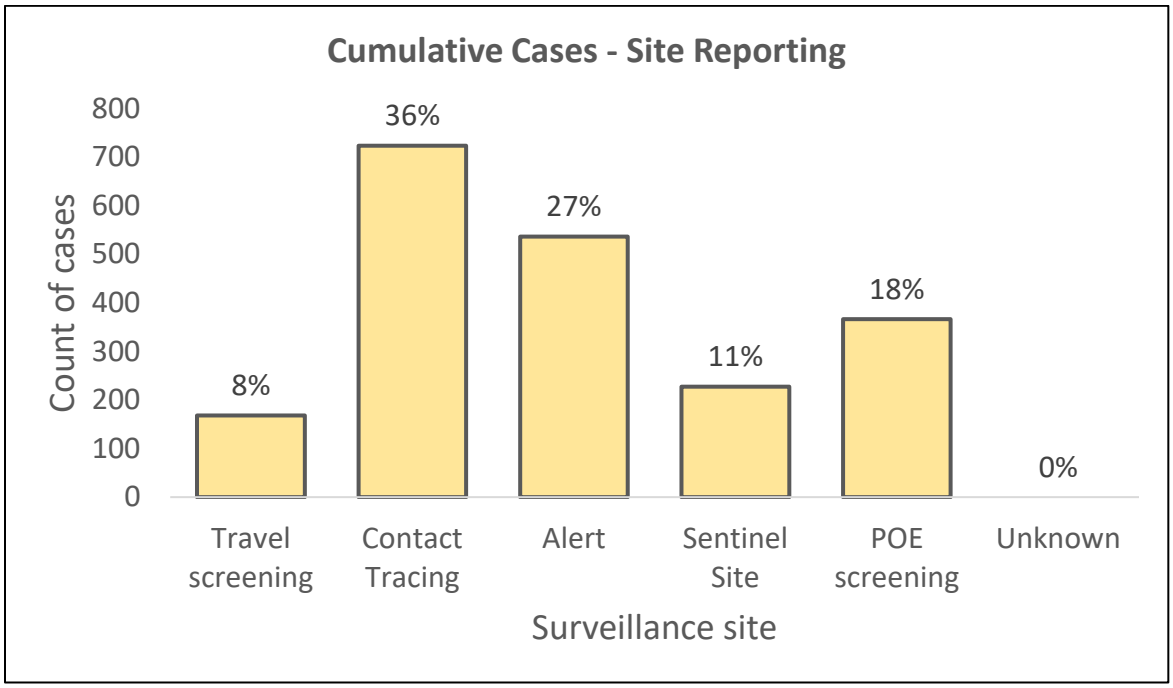


Figure 5. Distribution of reported cases by surveillance site reporting in A) Week 45, and B) cumulatively since COVID-19 surveillance began

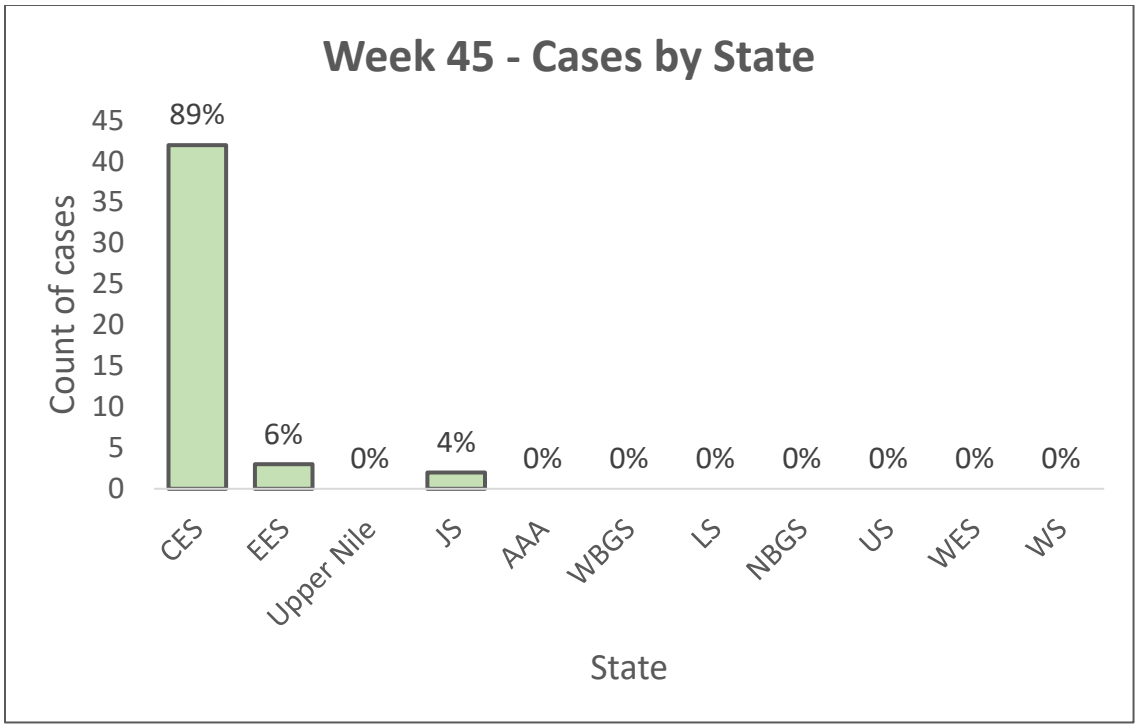


Figure 6. Distribution of reported cases by state in Week 45

Interpretation and recommendation

- The number of reported cases in Week 45 (47) is very similar to Week 44 (45)
- Better data on total people tested through each site and in each state and by nationality, age, and sex would help clarify what is causing observed patterns in case demographics.
- Travel screening and POE screening accounted for 77% in Week 45 while no cases were from contact tracing and very few (2%) were from alerts. However, cumulatively over all time, majority of the cases were sourced from either contact tracing (36%) or alerts (27%). It is not clear why there has been such a dramatic shift in the source of cases over time, although the restart of international travel and the subsequent requirement for a COVID-19 free certificate before travel may partly explain the shift.
- Very few cases have been detected from the states outside Central Equatoria, indicating that decentralized testing and communication needs to be improved

Laboratory Update

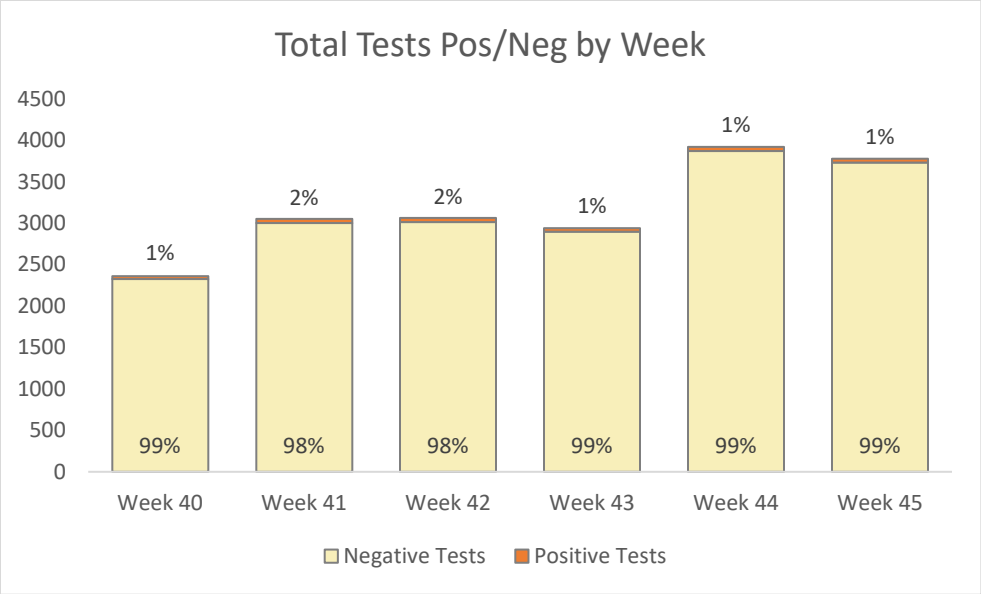


Figure 7. Number of negative and positive tests per week for Weeks 40-43

Interpretation and recommendation

- The percent positive rate remained stable in Week 45 at 1%, but the overall number of tests slightly went down (from 3923 to 3779).
- More complete data on total tests run over time since testing began by date, lag between sample receival and result reporting, and total test capacity would provide a more complete picture of the status of testing and laboratory capacity. Further lab data would also enable reporting all other case numbers relative to the number of tests run rather than as an absolute number.

Hotline/Alert System Update

During Week 45, there were 63 (58 through the hotline and 5 through self-reporting) potential COVID-19 alerts [Fig 8]. Of these, 49 (78%) were verified and 33 (67%) were investigated by the rapid response team (RRT). Samples were collected from all 33 (100%) of investigated alerts [Figure 8]. About 78% of the potential alerts were from Central Equatoria followed by Western Bahr-el-Ghazal and Upper Nile [Fig 9]. Two alerts returned positive for COVID-19.

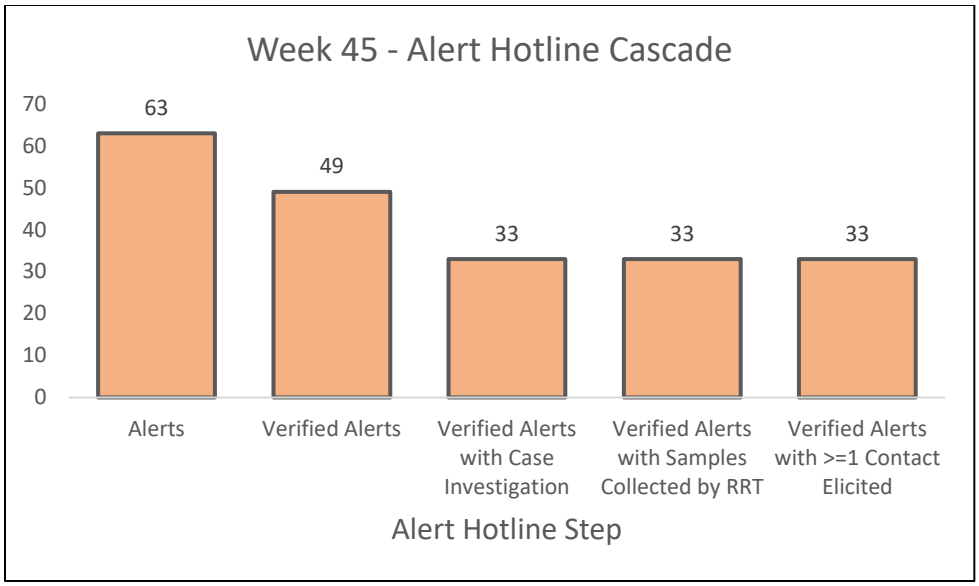


Figure 8: COVID-19 related alerts cascade for Week 45

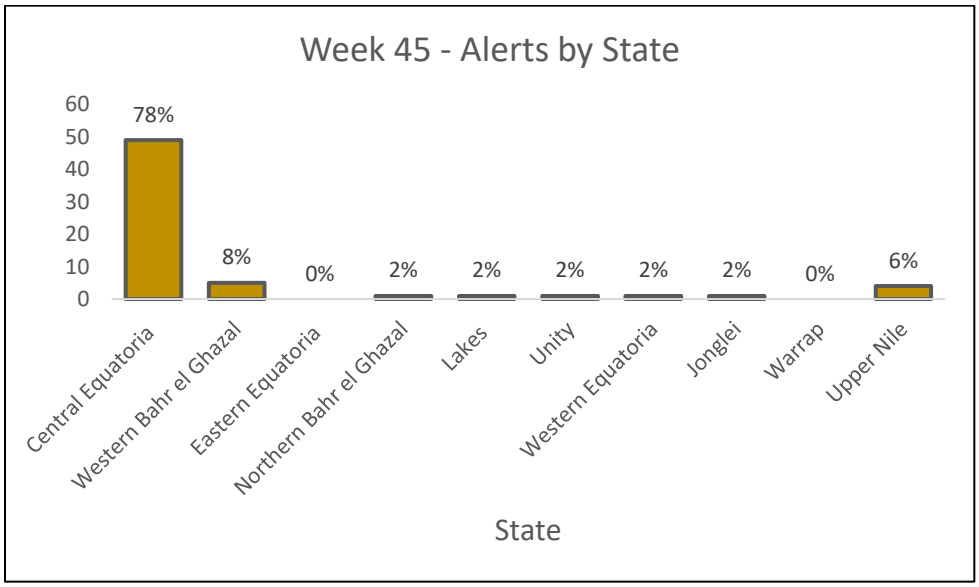


Figure 9: Distribution of Potential COVID-19 alerts by state for Week 45

Interpretation and recommendation

- Of verified alerts (49) screened to meet case definition for COVID-19, all (100%) were investigated and sampled.
- Alerts represent a small number of total tests run in South Sudan. Information on why so few alerts come through the hotline would assist in improving this surveillance system.
- Most alerts come from Central Equatoria, indicating gaps in the states mostly due to the ability to reach the system and the subsequent follow-up of the calls reverted to the state RRTs for their action.

Contact Tracing System Update

There were 114 new contacts enrolled this week. Contact tracing recently switched to a new, community-based system, and as of Week 45, the new contact tracing program has reached out to 260 index cases. Of the 260 index cases where contact was attempted, 10% are currently pending follow up, 73% were not able to be enrolled, and 17% agreed to list contacts [Table 1]. From those index cases agreeing to list contacts, a total of 262 contacts have been listed. Cumulatively, the case-to-contact ratio stands at about 1:3, but that ratio results from a heavily skewed distribution of contacts reported by index cases: 88% of cases reached out to reported zero contacts, and even among those who reported at least one contact, most report 1-4 contacts, while a small number report a very high number of contacts such as the single index case who reported 39 contacts [Fig 10]. There were no positive cases originating from traced contacts in the past week.

Index Case Contact Listing Status	Count of Status	Percent of Status
Accepted	44	16.92%
Being followed by WHO	3	1.15%
Death case and relatives declined to list any contact	1	0.38%
Deceased case	1	0.38%
Declined call	1	0.38%
Declined call/Denied Results	7	2.69%
Declined call/language Barrier	1	0.38%
Dropped	174	66.92%
No contact Number	1	0.38%
Pending	27	10.38%
Grand Total	**260**	**100.00%**

Table 1. Count and percent of index cases who agreed or declined to list contacts

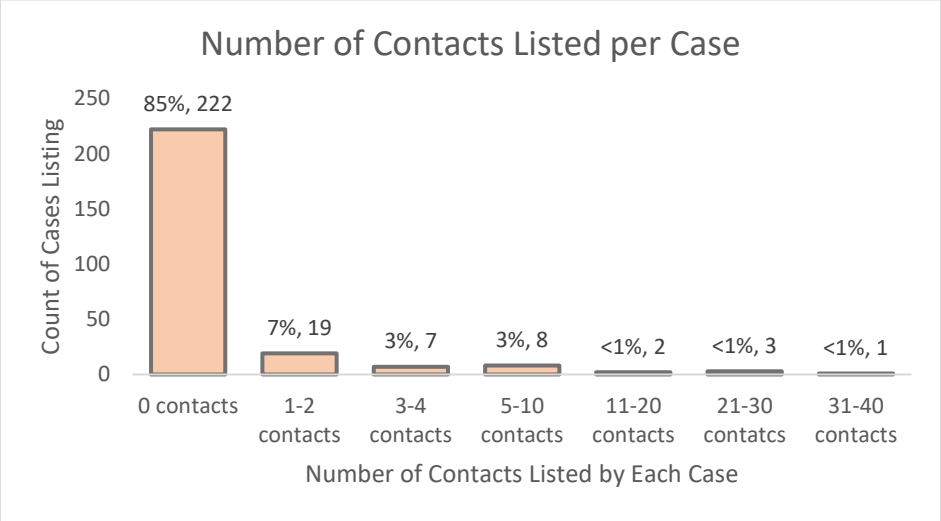


Figure 10. The distribution of contacts reported by each index case

Interpretation and recommendation

- Most cases report zero contacts, and the contact to case ratio is driven by a very small number of index cases who report a very large number of contacts.
- The number of contacts enrolled has continued to increase significantly as community based contact tracing establishes themselves. This number will likely continue to grow over time and represents strong work by the newly trained contact tracing team.
- The main barriers to successfully enroll contacts are
    1) A lack of cooperation from cases to share contacts
    2) Difficulty finding the correct contact address for contacts
    3) Difficulty getting contacts to respond to phone calls

Case Management Update

Most cases that record the type of case management are managed at home (57%), with very few admitted to a health facility or hospital. A significant proportion of cases have "unknown" (38%) case management type at first contact and in Week 45 case management type was not recorded for any case. Eighty-nine of all cases are discharged as of Week 45. Fifty-nine total have died according to recorded data yielding a case fatality rate of 2% [Fig 11].

Case management at first detection	Count	Percent of total cases
Home management	1699	57%
Hospital	15	1%
Isolation center	4	0%
UN health facility	2	0%
UN home management	3	0%
Died	10	0%
Unknown	1130	38%

Table 2. Distribution of case management types for cumulative cases, showing total count and as a percent of total cases. Data is taken at date of first contact with patient

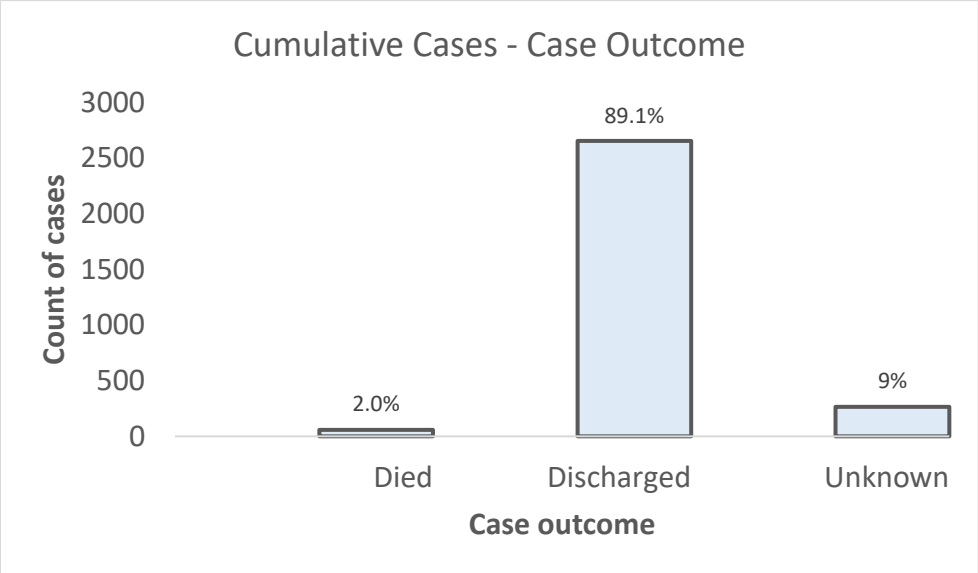


Figure 11. Distribution of case outcome for cumulative cases

Interpretation and recommendation

- Almost all cases with a case management type are managed at home. About a third of cases do not have case management type reported.
- **Case management type has not been recorded since mid-June even though case management partners have been collecting, recording, and sharing data. Final outcomes other than deaths have not been updated for several weeks either. This data recording issue needs to be rectified.**
- The recorded death rate stands cumulatively at about 2%.

Risk Communication Update

A table summarizing cumulative indicators for risk communication is below.

Indicator	Count
Number of people reached with key COVID-19 messages by community mobilizers through interpersonal awareness sessions during household visits	101,255 (58,021 Male; 43,234 Female)
Number of people reached with key COVID-19 messages through megaphone walks	67,536
Number of community mobilizers trained on COVID-19	28
Number of community influencers (religious leaders, teachers, women leaders, and youth leaders) trained on risk communication and community mobilization issues (COVID-19 related)	33
Number of weekly radio talk shows on COVID-19 conducted in which different content experts and influencers participated	33
# Radio jingles aired in 10 local languages through 40 radio stations across all 10 states	1,043
# Rumors tracked and responded to during this week	5

Table 3. Count of risk communication indicators since activities began

Interpretation and recommendation

- Risk communication is vital to ensure compliance with COVID-19 mitigation measures. A more detailed description of ongoing risk communication activities and indicator measures was provided in Week 45.

Points of Entry Update

This epidemiological week, IOM screened a total of 13,065 travelers from four PoEs, at Juba International Airport (5,543), Nimule land crossing (3,571), Wau Airstrip (1,430) and Abyei - Amiet land crossing (2,521). There was no traveler who underwent secondary screening during this reporting week. This brings COVID-19 cumulative number of travelers screened from 15 Feb 2020 to 396,165.

In Renk border – Wunthou land crossing, no passengers arrived or screening activities took place as Sudanese communities residing in Joda bordering South Sudan blocked trucks from crossing the border. In addition, IOM is coordinating with MOH to finalize a revised version of the international arrivals form to accommodate the new case definition for COVID 19.

For more information please contact the South Sudan Public Health Emergency Operation Centre {PHEOC]

Email: sspheoc@gmail.com
Tel #: +211922202028
For additional information follow these links:
http://moh.gov.ss/daily_updates.php
http://moh.gov.ss/covid-19.php

Note: COVID-19 testing in South Sudan is free of charge