REPUBLIC OF SOUTH SUDAN



MINISTRY OF HEALTH

Weekly Update on Ebola Virus Disease (EVD) Preparedness Activities in South Sudan

Update # 48 Week 32 (5-11 August 2019) Date: 12 August 2019

 $^{
m v}$ # of cases since August 2018, m 0

1. Highlights of the week

- Five Ebola alerts were reported from 5-11 August 2019 in Juba and Yambio. Rapid response teams (RRT) were deployed for case investigation and sample collection. Out of the five alerts, samples were collected from four. Three samples were negative using GeneXpert and Polymerase Chain Reaction (PCR). One sample was delivered on the 12 August to the National Public Health Laboratory and the results will follow.
- Preparation for full scale simulation exercise to be conducted on 14 August was ongoing. The Exercise management team is composed of experts from WHO-Regional Office for Africa, Center for Disease Control and Prevention (CDC-USA), Nigeria Center for Disease Control and Prevention (NCDC), Republic of Kenya-Ministry of Health, and WHO South Sudan Country Office.
- The Logistics Technical Working Group had a discussion with the Ministry of Health (MOH) Incident Manager on procedures for fast tracking of Ebola virus disease (EVD) supplies and personnel entry visas.
- Under the auspices of UNICEF, Technical Working Groups identified priority activities and funding requirements to strengthen EVD preparedness, for submission to the Contingency Emergency Response Component (CERC) of the Provision of Essential Health Services Project funded by the World Bank.
- 83,808 primary screenings were conducted, along with 82 secondary screenings, at 32 points of entry during the Epi-week 32. The cumulative number of screenings conducted since August 2018 is 2,928,250 (see table 1 below for more information).
- Maridi state Rapid Response Team (RRT) participated in a table top exercise (TTX) and simulation drill from 9-10 August 2019.

2. Situation update - Democratic Republic of Congo (DRC)

- As of 6 August, a total of 2,781 EVD cases were reported, including 2,687 confirmed and 94 probable cases, of which 1,866 cases died (overall case fatality ratio 67%). Of the total confirmed and probable cases, 56% (1,572) were female, and 28% (791) were children aged less than 18 years.
- The EVD outbreak in North Kivu and Ituri provinces in the DRC continued this week with similar transmission intensity to recent weeks with an average of 86 cases per week (Figure 1).
- There are currently no confirmed cases of EVD outside of the Democratic Republic of the Congo.



Figure 1: EPI curve showing the outbreak of EVD in DRC by week of onset

3. Public Health Preparedness and Readiness in South Sudan

Currently for the EVD outbreak in North Kivu, the WHO Regional Office for Africa has prioritized four of the nine countries (Burundi, Rwanda, South Sudan and Uganda) neighboring the Democratic Republic of the Congo to enhance operational readiness and preparedness (Figure 2)



Figure 2: Map showing priority countries for EVD preparedness

3.1Coordination

- August 8 2019 a coordination meeting was conducted by the National Taskforce (NTF).
- Coordination meetings were conducted during the week by EVD State Task Forces (STFs) in Jubek, Torit (Nimule), Gbudwe (Yambio), Yei River, Maridi, and Tambura states.
- Meetings were conducted by the respective Technical Working Groups (TWGs) to provide technical guidance and support to partners implementing EVD preparedness activities.

3.2 Resource mobilization

- The second National EVD Preparedness Plan (April September 2019) with a financial requirement of US\$ 12.2 million is 38% funded (including secured funding and confirmed commitments).
- Under the auspices of UNICEF, Technical Working Groups identified priority activities and funding requirements to strengthen EVD preparedness, for submission to the Contingency Emergency Response Component (CERC) of the Provision of Essential Health Services Project funded by the World Bank.

3.3 EPI-Surveillance and Laboratory

- Five Ebola alerts were reported from 5-11 August 2019 in Juba and Yambio. Rapid response teams (RRT) were deployed for case investigation and sample collection. Out of the five alerts, sample were collected from four. Three samples tested negative through GeneXpert and Polymerase Chain Reaction (PCR). One sample was delivered on the 12 August to National Public Health Laboratory awaiting the test result.
- The Epi-surveillance TWG in collaboration with other TWGs and MOH conducted joint supportive supervision visits to 3 healthcare facilities in Juba.
- **•** Preparations for a full scale simulation exercise to be conducted on 14 August were ongoing.

3.4 Case Management, IPC - WASH

- UNICEF/CDC developed an on-line document repository for training materials/database, assessment tools, calendar of meeting, list of functional health facilities (HFs) and four Ws.
- IMC has completed training of the targeted 500 Health Care Workers, including 150 private health care facility staff, on EVD screening, detection, reporting and referral.
- Preliminary Health Facility IPC assessment findings were presented during the TWG meeting. The data, from 68 Health Facilities, will be presented to the NTF in a subsequent meeting.

3.5 Border Health and Point of Entry (PoE) Screening

- 83,808 primary screenings conducted, along with 82 secondary screenings, in 32 points of entry during Epiweek 32. The cumulative number of screenings conducted since August 2018 is 2,928,250 (see table 1 below).
- Active screening of incoming travellers through the PoEs is ongoing. IOM is also conducting population flow monitoring in strategic entry points along the South Sudan and Democratic Republic of Congo border.
- IOM conducted a multi-sectorial assessment of EVD preparedness at health facilities and PoEs in Lojulu county (Yei).

Primary screened		Secondary screened		Alerts	
Reporting Week	Cumulative	Reporting Week	Cumulative	Reporting Week	Cumulative
					22 generated, 8
83, 808	2, 928, 250	82	1,808	0	met case
					definition

Table 1: Summary of screenings from 31 points of entry

3.6 Risk communication, community engagement and social mobilization (RCCE&SM)

 TWG conducted an EVD briefing for 30 Country Directors of International Non-Governmental Organization (INGOs).

3.7 Operations & Logistics

The Logistics Technical Working Group held discussions with the Ministry of Health (MOH) Incident Manager on procedures for fast tracking of Ebola virus disease (EVD) supplies and personnel entry visas.

3.8 Challenges/Gaps

While new funding opportunities are under exploration and further donor contributions being planned, limited funding for some technical pillars and key activities continues to constrain preparedness.

4 Donors and partners involved in EVD preparedness and readiness

MOH, AAH, ACROSS, AMLIMA, AMREF, ARC, Canada, CDC, CERF, CMMB, CONCERN, COPE, CORDAID, CUAMM, DFCA, ECHO, ECSS, GAVI, Germany, GOAL, HELP, HLSS, HPF, IFRC, IMC-UK, Internews, IOM, IRC, JICA, MEDAIR, MSF, OXFAM, REACH, SAC, Samaritan's Purse, Save the Children, Solidarity International, SPLA, Ministry of Interior, SSDO, SSHF, SSRC, SSUHA, TRISS, UK/DFID, UMCOR, UNHCR, UNDP, UNICEF, UNMISS, UNOCHA, USAID/OFDA, WFP, WHO, World Bank, WVSS.

For more information, please contact:					
Dr. Richard Lako Lino	Dr. Pinyi Nyimol Mawien	Dr. Mathew Tut Kol			
Incident Manager	Director General PHS	Director EPR/PHEOC Manager			
Email: richardlako@yahoo.com	Email: pinyiaupur@gmail.com	Email: <u>tut1988@yahoo.com</u>			
Tel.: +211 926 592 520	Phone: +211 916 285 676	Tel: +211 922 202 028			

This update was produced by the EVD Secretariat with technical support from the World Health Organization and is endorsed by the Ministry of Health.