

REFUGEE SURVEILLANCE UPDATE (MABAN AND YIDA)

Epidemiological Week 18

29th – 5th May 2013

Highlights

- The proportion of health facilities in Maban that submitted the weekly reports to the state and central level increased to 19 bringing completeness to 86.4% (19 out of 22). (*See list of health facilities in Maban and supporting partners on page 2*). All facilities serving the refugees in Maban reported on time in week 17, while reporting from facilities serving the host communities remained 12 out of 15 facilities.
- Only one health facility serving Yida refugee camp reported on time this week.
- Acute watery diarrhea was the leading priority disease recorded in the refugee camps (85.5%), followed by Acute Bloody Diarrhea (6.2%), AJS (4.5%), and malaria (3.9%)
- One hundred and three (103) suspected Acute Jaundice Syndrome (AJS) cases (or Hepatitis E cases) and no related deaths were recorded from Maban and Yida in week 18. Of the total cases, 84 (81.6%) were reported from Maban refugee camps and 19 (18.4%) from Yida refugee camp. No cases were reported from the host community.
- Of the cases from Maban, 39.1% of the cases were reported from Batil, followed by Gendrassa (31.0%), Jamam (19.1%), and Doro (10.7%).
- The cumulative AJS cases recorded from Maban refugee camps are 9,883 and 175 related deaths, while 339 AJS cases and 12 related deaths have been recorded in Yida from the beginning of the outbreak till week 18.
- No meningitis, measles, cholera, or VHF cases were reported from all the refugee camps and host community.

Reporting Performance

The total number of health facilities expected to report for *Early Warning and Alert Response Surveillance* (EWARS) system is 22 facilities in Maban and 3 facilities in Yida. Of these seven facilities are serving refugees camps in Maban and three facilities are serving Yida refugee camp. Some of the health facilities serving the host communities have not been operating due to inaccessibility during rainy seasons or lack of health workers. Of late, some of silent ones started operating. Long distance and lack of communication equipment in some areas are sometimes a reason for not reporting on time. Improvement in reporting has been possible due to improved supervision from the county health department and support from partners.

FACILITY IN MABAN	WK12	WK13	WK14	WK15	WK16	WK17	WK18
Doro camp clinic MSF-B	1	1	1	1	1	1	1
Jamam CAMP MSF-H CLINIC	1	1	1		1	1	1
Batil GOAL clinic(west & South)	1	1	1	1	1	1	1
Batil MSF-H	1	1	1			1	1
Batil Medair SE Clinic	1	1	1	1	1	1	1
Gendrassa MSF H	1	1	1			1	1
Gendrassa IMC	1	1	1	1	1	1	1
Bunj PHCC Relief International	1	1	1	1	1	1	1
Bunj Hospital SP/GOAL	1	1	1	1	1	1	1
Dangaji PHCU Relief International	1	1	1	1	1	1	1
Gesm Allah PHCU Relief International	1	1	1	1	1	1	1
Jamam PHCU GOAL	1	1	1	1	1	1	1
Genkwata PHCU MOH	1	1	1		1	1	1
Thuaye PHCU MOH	1	1	1	1	1	1	1
New Guffa PHCU MOH	1	1	1	1	1	1	1
Khor Tumbak PHCU MOH	1						
Puomky PHCU SCiSS-MRDO							
Doro PHCU SIM	1	1	1	1	1	1	1
Liang PHCU SCiSS-MRDO	1	1	1	1	1	1	1
Nila PHCU SCiSS-MRDO	1	1	1	1	1	1	1
Sheta PHCU SCiSS-MRDO	1	1	1	1	1	1	1
Baugaya PHCU GOAL							
Total Facilities Reporting	20	19	19	15	17	19	

Table 1: Health facilities serving refugee and host communities in Maban and Yida

FACILITIES IN YIDA	WK12	WK13	WK14	WK15	WK16	WK17	WK18
Wang Kuat PHCC	1	1	1		1		0
Yida PHCC	1		1		1		0
MSF-France Clinic	1		1	1	1	1	1
Total Facilities Reporting	3	1	3	1	3	1	1

Epidemic Prone Disease Reported

Acute Watery Diarrhea (AWD)

A total of 1,977 AWD cases were reported in Maban and Yida Refugee camps during this reporting week with one related death in Doro camp. AWD accounted for 85.5% Of priority diseases reported this week. Proportion of cases below five years was at 64.8% of all reported AWD cases in all the camps.

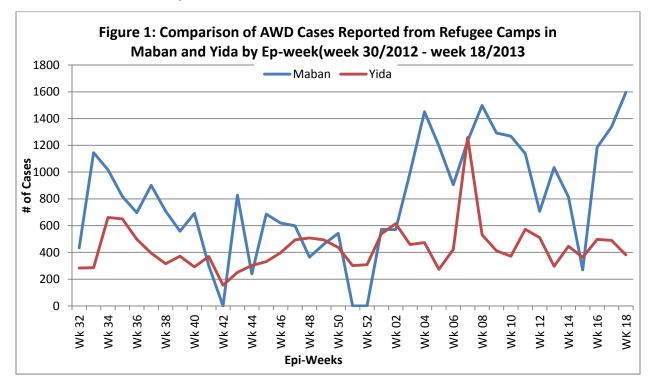


Figure 1 shows a comparison of AWD cases reported by Epi-week in year 2012 -2013 from facilities serving the Refugees in Maban and Yida. The incidence rate of AWD in the camps of Maban increased again in week 18. The cases among the Host community in Maban decreased to 271 from 394 in the previous week with no related deaths.

Dysentery (ABD)

A total of 143 cases of ABD with no related deaths were reported in week 18 from the refugee camps. Proportion of cases in children below five years remained about the same (40.6%) this week compared to the previous week (41.9%).

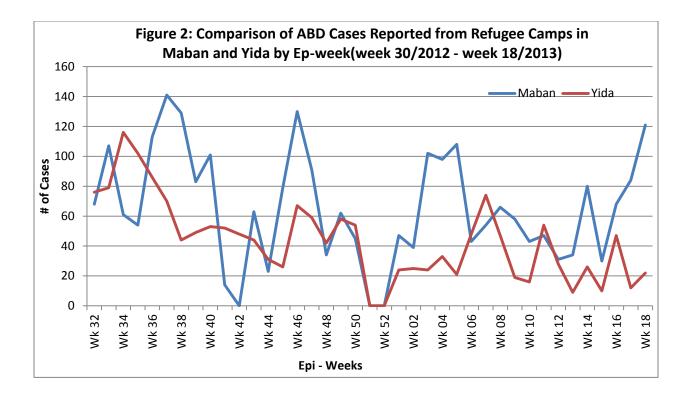
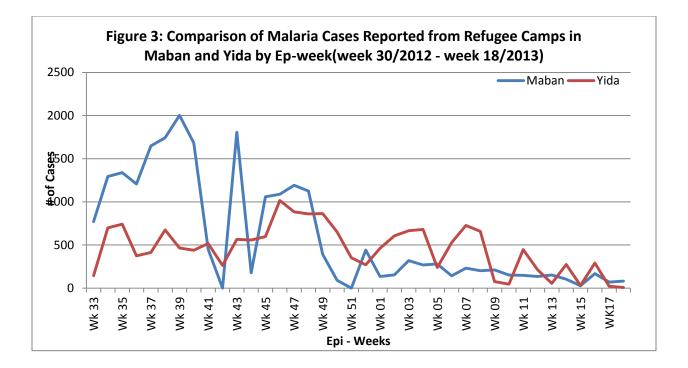


Figure 2 above shows a comparison of ABD cases reported by Epi-week and year 2012 – 2013 in Maban and Yida camps. The ABD trend reported from the refugee camps in Maban increased this week for the third week in a row. The ABD incidence among the host community in Maban increased to 127 from 121 cases in the previous week.

Malaria

Malaria incidence also remained about the same this week, 90 cases compared to 93 in the previous week with one related death in Yida. Out of all the cases, 32.2% were reported in children below five years of age. Malaria incidence rate in children has remained low in seven consecutive weeks. In Maban County, 506 cases of malaria with no related deaths were reported from facilities serving the host community. In this malaria cases decresed this week (506) compared to those recorded in the previous week (681). The under 5 years old in the host community had a higher incidence of malaria (58.5%) than those in the refugee camps (28.5%).

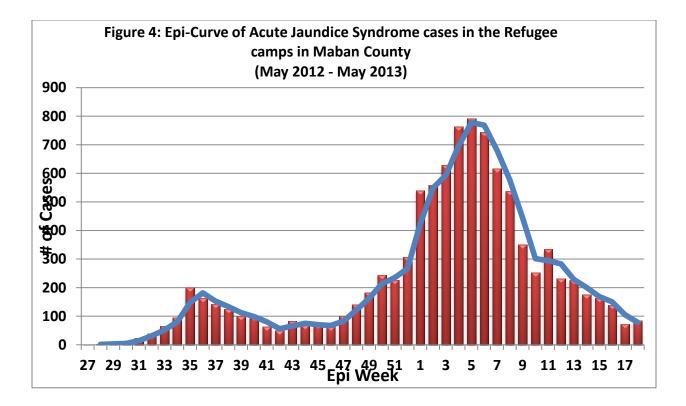
Figure 3 below shows a comparison of the incidence of malaria in Maban and Yida.

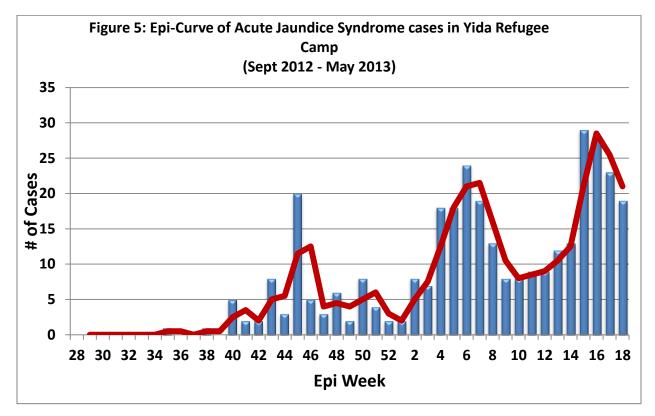


Acute Jaundice Syndrome (AJS)

A total of ninety eight (103) suspected Acute Jaundice Syndrome cases (or Hepatitis E cases) and no related deaths were recorded from Maban and Yida in week 18. As has been the trend, 81.6% of new AJS cases were recorded in Maban refugee camps (*figure 4 and 5 for AJS Epi-Curve in Maban and Yida*). As shown in figures 4 and 5 below, a cumulative AJS cases recorded from Maban refugee camps was 9,883 and 175 related deaths, while 339 AJS cases and 12 related deaths were recorded in Yida from the beginning of the outbreak till week 18. Cases in Yida remained in the same range (15–30) for three conservative weeks. A total of 51 pregnant women in Maban have died of the disease since the outbreak started. New cases recorded in Maban refugee camps continued to decline for the 13th week in a row. Compared to previous weeks, AJS/HEV cases from Batil have reduced remarkably since mid-February although the attack rate is still the highest among all the camps. Gendrassa and Jamam are still reporting high numbers of AJS/HEV cases compared to the previous months. In general the epidemic is on the decline. This is the fifth week to register cases below 200 since December last year.

Community awareness, and good sanitation and hygiene practices need to be stepped up in areas where WASH levels are still below standards. MoH, WHO, UNHCR, and other health and WASH partners continue to implement different activities to improve the control of the outbreak. This week no case was reported from the host community.





Other Disease: No suspected case of Meningitis, Measles, Viral Hemorrhagic fever or Influenza like illness was reported during this week.

Camps	Doi	ro	Batil		Gendrass a		Jamam		Maban TOTAL		Yida		Yida TOTAL		Host Community	
Cases/ Death	С	D	С	D	С	D	С	D	с	D	С	D	с	D	С	D
Suspected Cholera	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AWD	581	1	49 3	0	259	0	26 3	0	159 6	1	38 1	0	38 1	0	27 1	0
BD	96	0	4	0	17	0	4	0	121	0	22	0	22	0	16 9	0
Meningitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Measles	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AFP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AJS	9	0	33	0	26	0	16	0	84	0	19	0	19	0	0	0
VHF	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Malaria	56	0	9	0	2	0	15	0	82	0	7	1	7	1	50 6	0
Neonatal Tetanus	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	742	1	539	0	304	0	298	0	1883	1	429	1	429	1	946	0

 Table 2: Summary of Priority Diseases in Maban and Yida Refugee camps week 18

<u>Key</u>: AWD – Acute Watery Diarrhoea, , ABD – Blood Diarrhoea/Dysentery, Men – Meningitis, AJS – Acute Jaundice Syndrome, AFP – Acute Flaccid Paralysis/Polio , NT - Neonatal Tetanus, **0** -Zero Report, **C** – Cases , **D** - Deaths , Timely reports - Reports received before Wednesday 10:00am, Completeness - Proportion of health facilities reporting in a county/state, Timeliness -Proportion of county in a state reporting on time. HFs- Health Facilities, EPI-Expanded program for immunization

For comments or questions, please contact: Surveillance Department, MoH-RSS, Tel: 0955551147; 0922186571; E-mail: outbreak_ss_2007@yahoo.com, HF radio frequency: 8015 USP; CELL CALL: 7002





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