CORE Group Polio Project Community-Based Surveillance Activities in South Sudan Progress Report prepared for The Bill and Melinda Gates Foundation

Reporting period: January 2016 – April 2017
Community-Based Surveillance: Measuring and Strengthening the CGPP’s Impact in South Sudan’s conflict-affected states

The CORE Group Polio Project’s Community-Based Surveillance (CBS) system has become very adept at detecting and reporting suspected polio cases in South Sudan. Through the efforts of 3,000-plus community volunteers, this unique, innovative approach has pushed past growing insecurity and lack of access to reach children in the unstable areas of the country.

CGPP works in the three conflict-affected states of Jonglei, Upper Nile and Unity and in Kapoeta East in Eastern Equatoria State due to its high population movement and proximity to refugee routes in and out of Kenya, specifically to the Kakuma Refugee Camp in northwest Kenya’s Turkana County.

More than half of the suspected AFP cases in three conflict-affected northern states from January 2016 through March 2017 were reported through CGPP community-based surveillance efforts – a strong indicator of the system’s effectiveness in difficult-to-reach and insecure areas. Moreover, CGPP has decreased silent or non-reporting areas by 82 percent, from 17 counties in October 2015 when the Gates-funded initiative began, to just three counties by March 2017. During the same period, CGPP has expanded its coverage from eight counties to 33 counties.

Jonglei achieved a NPAFP rate of 3.46, Upper Nile a rate of 3.01 and Unity State a rate of 1.39 due to access limitations. Improvements in NPAFP rates demonstrate CGPP-South Sudan’s success in its project states; the anticipated expansion into Unity State will allow greater accessibility for active search and reporting of acute flaccid paralysis (AFP.)

<table>
<thead>
<tr>
<th>States</th>
<th>Population &lt;15</th>
<th>Stool Adequacy</th>
<th>NPAFP Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper Nile</td>
<td>895,541</td>
<td>63%</td>
<td>3.01</td>
</tr>
<tr>
<td>Jonglei</td>
<td>983,693</td>
<td>88%</td>
<td>3.46</td>
</tr>
<tr>
<td>Unity</td>
<td>86,411</td>
<td>92%</td>
<td>1.39</td>
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</tbody>
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Source: WHO Weekly Surveillance Data 2016

The strong contribution of community-based surveillance efforts is reflected in the overall increase in the number of reported AFP cases since the beginning of the Gates-funded initiative. All sixteen NPAFP cases in the first three months of 2017 were reported by project staff and volunteers.
NGO Partnership The project secretariat directs the work of three national organizations: BioAid, Support for Peace and Education Development Program (SPEDP) and Universal Network for Knowledge and Empowerment Agency (UNKEA.) Presently the three organizations support the work in 34 counties in four states; BioAid works in 16 counties; SPEDP supports work in 11 counties and UNKEA works in 7 counties. Per the MOH, at least 400,000 children under 5 as of July 2015 are unvaccinated or under vaccinated in the three conflict states. The destruction of health facilities, including the cold chain, and the near absence of health care staff add to the country’s public health crises.

Reducing the number of silent counties by increasing surveillance is directly linked to the work of 3,237 key informants, 202 payam assistants, 33 county supervisors and three state surveillance supervisors. Improved sensitivity of surveillance was found from January 2016 through March 2017 when a total of 38 of 73 reported AFP cases in the inaccessible and insecure 33 counties of Jonglei, Upper Nile and Unity were reported through community-based surveillance; all three NPAFP cases in Eastern Equatoria state were reported by volunteers. Three counties of Pigi (Canal) and Nyirol in Jonglei and Longochuck in Upper Nile remain inaccessible. Meanwhile, plans to reach Leer County in Unity State are being developed but full operations remain on hold due to continued violence.
State | Total Population | Population under 1 | Population under 5 | Population under 15
---|---|---|---|---
Upper Nile | 1,179,984 | 47,424 | 248,827 | 557,424
Jonglei | 1,555,989 | 63,304 | 327,660 | 660,593
Unity | 937,510 | 37,501 | 196,877 | 440,628
Kapoeta East (Eastern Equatoria) | 30,197 | 1,887 | 9,436 | 18,873
**TOTAL** | 3,703,680 | 150,116 | 782,800 | 1,677,518

**Project structure** The four-member CGPP Secretariat is based in Juba and works closely with the MOH, WHO, UNICEF and CDC on the EPI Technical Working Group. Gates Foundation Consultants Dr. Abdalla Elkasabany and Carl Hasselblad collaborate with South Sudan-CGPP and regularly attend monthly meetings held with all project partners to review field implementation, discuss improvements to project implementation, document challenges and share information on best practices.

The community-based surveillance program was designed with a heavy supervision component. Acting upon guidance from the Gates Foundation, three State Surveillance Supervisors were hired in September 2016 and spend 85 percent of their time in the field providing support to county supervisors through mentoring and capacity building. The addition of these staff has allowed supervision of staff to increase from less than 10 percent at the beginning of the project to 70 percent, or 23 counties, between January 2016 and March 2017. The target rate of 95 percent of counties being supervised by state supervisors is within reach. The Gates Foundation’s Mr. Hasselblad continues to provide expertise from the field.

Project staff trained and deployed 33 county supervisors to oversee project implementation and work closely with county health departments, WHO field staff, Gates Foundation consultants and other partners. WHO and CGPP provided a three—day training in June 2016 in Juba to train county supervisors to support WHO field supervisors as well as to conduct AFP investigations in areas inaccessible to WHO. Additionally, CGPP conducted a training in Juba in late September 2016 to review project performance, implementation challenges and improved monitoring progress through strengthened report writing for 26 county supervisors, project staff and monitoring and evaluations officers.

The project’s county supervisors paid monthly visits to about 90 percent of the payam assistants. In turn, payam assistants visited more than 80 percent of key informants at least once a monthly. As of March 2017, 202 payam assistants were hired to work closely with 3,237 key informants, with each assistant in charge of 10-15 key informants. Assistants provide supervision of informants, training to increase knowledge about AFP symptoms and closely follow reported cases of AFP. The project plans to meet its goal of hiring a total of 230 payam assistants when Leer County becomes accessible. CGPP distributed 29 motorbikes to county supervisors to assist with payam assistant supervision. Likewise, the project supplied more than 150 bicycles to payam assistants to reach inaccessible areas. The remaining motorbikes and bicycles will be supplied to additional areas once the security situation improves and delivery details are confirmed with other humanitarian groups.

Key informants are well-respected and well-known in their communities. Traditional healers, church leaders, birth attendants, village chiefs, headmen, women leaders, and teachers volunteer to support active case search of AFP. Initially the project targeted 2,000 community informants, but the physical vastness of the project areas demanded additional grass-roots involvement.
The CGPP Secretariat staff and BMGF Consultants, Dr. Abdalla and Mr. Hasselblad, revised monthly reporting tools for the county supervisors and payam assistants. The newly developed tools include field check lists for county supervisors; standardized performance measurements of payam assistants and numerous forms for AFP investigations, social mapping tools and work plan templates. Both consultants conducted a one-day training in November 2016 to roll out the newly developed community based surveillance tools and provided a strategy for introducing the tools to field locations. The meeting was attended by 20 participants from the three implementing partners, including executive directors, project officers, M&E Officers and the three state surveillance officers.

**Cross border collaboration and coordination** CGPP South Sudan has been a leader in the Cross-Border Initiative (CBI) since 2012 by planning, organizing and implementing meetings with neighboring countries to work towards establishing Special Vaccination Posts (SVPs) at heavily travelled cross-border sites. In partnership with SPEDP, the local government of Koboko in Uganda and the Democratic Republic of Congo, the CGPP South Sudan convened a cross-border meeting in December 2016 in Arua district in northwest Uganda to discuss routine immunization, surveillance and social mobilization efforts to eradicate cross-border transmission of the wild polio virus and to respond to any potential outbreak.

As the conflict intensifies and conditions deteriorate in South Sudan, violence, thirst and hunger are pushing 1.6 million South Sudanese out of their country and into asylum countries of Uganda, Ethiopia, Sudan, Kenya, DRC and Central African Republic. At the December meeting, 33 participants resolved that the cross-border vaccination posts should be extended and fortified to vaccinate children crossing into other countries. Most of these children are not fully vaccinated due to South Sudan’s broken health system and have not been reached by NGOs due to severe insecurity. Informal routes and settlements along the borders should be mapped as refuges are unable to reach IDP camps due to insecurity.

During 2016, a total of 60,308 children under 15 years old were vaccinated with one dose of oral polio vaccine at 13 cross-border vaccination posts. Of the children vaccinated, 4.6 percent were zero doses; the majority of zero-dose children came from the Joda Junub vaccination posts located in Renk County. The Joda Junub vaccination post is in an area that is home to Sudanese nomads who cross the borders during the dry season to purchase goods in preparation for the rainy season. Women and children from the Shilluk ethnic group crossed from Malakal to Sudan through Renk to avoid confinement in the Protection of Civilian Site in Malaka. As of March 2017, seven posts remained operational; the remaining posts were not operating due to a lack of cold chain and vaccines or rising insecurity.

**Financial Oversight:** In response to a small loss of funds in 2015, the project has tightened fiscal reporting guidelines and oversight and reduced the amount of money advanced to local NGOs pending liquidation. The project is aware that this has lead to some difficulties as local NGOs have sometimes been slow to
liquidate funds to receive additional payments. The CGPP Secretariat Director and World Vision Finance Director are working closely to improve the timeliness of funds allocation while building the capacity of local NGOs to manage their finances.

**Independent Campaign Monitoring and Community Mobilization:** In addition to Gate’s funding, CGPP receives funding for its other important activities in South Sudan from USAID and UNICEF. USAID funds the independent campaign monitoring of the country’s four annual SIAs; the quality and coverage of each campaign is evaluated by local teachers who are trained by state supervisors. UNICEF, meanwhile, funds social mobilization through a network of community mobilizers.

**Proposed continuation plan for 2017-2018** The CORE Group Polio Project-South Sudan is proposing to continue its operations in the three states of Unity, Jonglei and Upper Nile as well as Kapoeta East in Eastern Equatoria through June 2018. The project will strengthen community-based surveillance in the 34 counties and including the addition of Leer County once the security situation improves. The Cross-Border Initiative will be strengthened through more frequent regional cross-border meetings to expand the number of special vaccination posts to reach more children crossing to and from South Sudan.

CGPP’s specific objectives from July 2017 through June 2018 are outlined here:

- Reduce silent counties to less than 10 percent by the end of June 2018;
- Broaden the community-based network in Leer County in Unity State to detect and report any suspected cases of NPAFP in this vulnerable area hit especially hard by violence and famine;
- Improve AFP targets in Leer County and silent area;
- Provide refresher training to at least 95 percent of all county supervisors, payam assistants and key informants to review community-based surveillance knowledge;
- Strengthen supportive supervision at all levels to ensure that at least 90 percent of county supervisors, payam assistants and key informants are supervised each quarter; and,
- Maintain and expand cross-border polio vaccination posts targeting children under 15 years of age along strategic locations where refugees are fleeing violence.

The CGPP South Sudan will maintain its current project staff and structure with an important additional layer of staff at the state level. At the headquarters level, Mr. Lee Losey, Deputy Director of The CORE Group Polio Project and technical lead, will continue to guide overall project design and direction.

National Level: The Secretariat Director will continue to maintain the overall management of the project, coordinate the implementation of the grant in South Sudan and represent partners at national, regional and international forums. The Surveillance Project Manager and the Grants and Finance Officer will continue in their roles as part of the Secretariat office.

State Level: Three state surveillance officers will work independently to consistently monitor the project. To assist surveillance officers, CGPP South Sudan is proposing the recruitment of six project officers by the implementing partners to coordinate activities between the field, partnering organizations and the Secretariat.

County Level: County supervisors will continue to coordinate activities between the state and payam levels. CGPP South Sudan is proposing an expansion to a total of 40 supervisors from the current
level of 34 to allow widened coverage in areas controlled by different armed groups, as is the case in Manyo, Mayendit, Koch counties, and in the difficult to access counties of Pibor, Boma and Pochalla. At the payam and community levels, a total of 230 payam assistants will continue to collaborate with key informants at the boma (village) level and report to county supervisors. The community network of key informants will be increased by 800 to reach almost 4,000 volunteers who will continue their important work in the timely reporting of AFP cases.