

Highlights

- No new cVDPV3/2 cases reported this week in Somalia and Kenya. The last cVDPV3 cases were from Middle Shabelle, Runingod district, with onset date on 7 September 2018, while the date of onset of the most recent cVDPV2 is 2 September 2018.
- bOPV SIAs conducted in Kenya targeting 2,827,029 in 12 high-risk counties.



Figure 1: Cross-Border SIA teams vaccinate pastoralist on transit

Objective 1: Build effective partnerships between agencies

The CGPP Kenya and Ethiopia Secretariat Directors held a meeting with the HQ team on Global Health Security Agenda (GHSA) in Uganda. Also, several coordination meetings held in Uganda with International Rescue Committee (IRC), Medical Teams International (MTI) and other partners on the start-up of the new CGPP sites in Northern Uganda bordering South Sudan



Fig. 2: CGPP meeting at the IRC meeting in Kampala (Uganda). Courtesy Photo CGPP



Fig. 3: The CGPP meeting with Medical Teams International (MTI) team.

Objective 2: Strengthen routine immunization systems
RI Outreach Services

Number of children < 12 Months reached by County, N=1,236

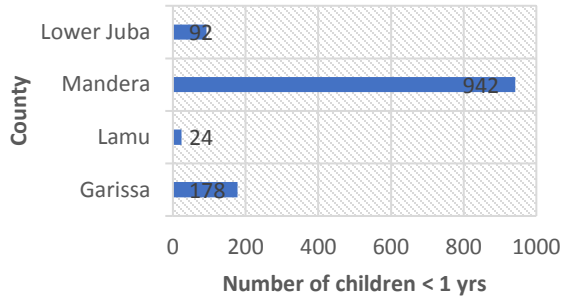


Fig 4: Number of Children < 1Yrs reached during the outreach Session, N=1,236

The number of OPV 3 children < 1 years vaccinated by gender N=1,045

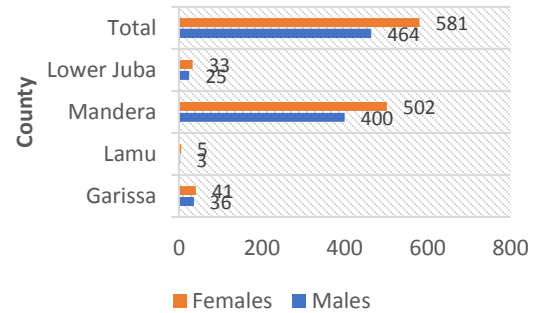


Fig.5: Children <12 Months vaccinated with OPV 3

The areas supported through outreach were Lamu (Lamu East), Garissa (Dadaab, Fafi, Hulugho), Mandera (Mandera North, West) and Lower Juba (Afmadow, Badhadhe). One thousand two hundred and thirty-six children reached with various antigens according to Fig. 4 above.

According to fig. 5, the total number of children < 1 year vaccinated by gender was 1,045 out of which the males were 464(44%), and the females were 581 (56%). The highest number of children 902 (86%) were seen in Mandera county while the lowest number of children reached during the outreach sessions was in Lamu 8 (0.8%).

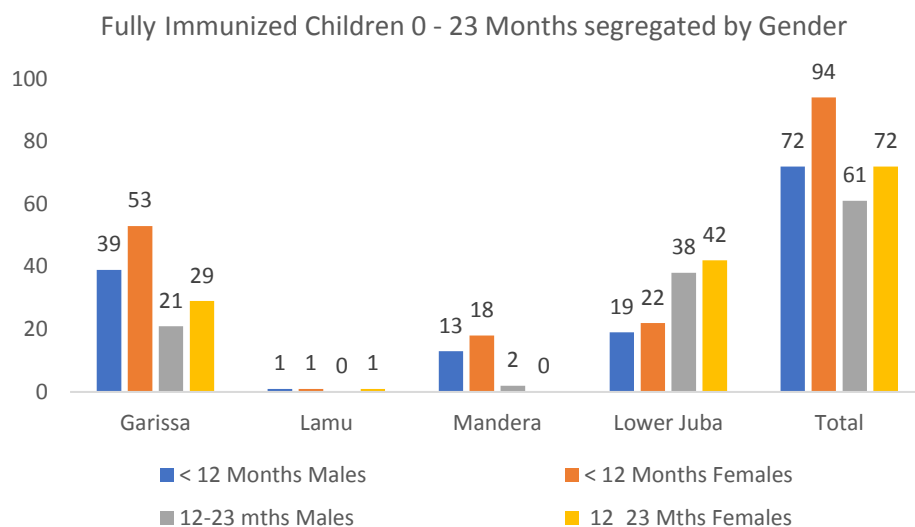


Fig.6 : FIC > 12 Months and FIC 12-23 Months

According to Fig.6 above, 166 children < 12 months recorded as being fully immunized out of which 72 (43%) were males while 94 (57%) were females. The total number of children registered as FIC under the age category of 12 - 23 months were 133 out of which 61 (46%) were males while 72 (54%) being females.

Three of the children were recorded as Zero doses and one of the children (33%) from Lamu county while 2 (67%) of the children from Lower Juba were recorded as Zero doses.

Social Mobilization Indicators:

Table 1: Social mobilization activities conducted by Social Mobilizers.

County/Sub county	# Community Mobilizers engaged	# HH Visited	# Family Covered	# < 5s reached	# one on one contacts	# group meetings held	# SM activities in border / Migrant
Garissa (Dadaab, Fafi, Hulugho)	9	465	2640	520	180	45	45
Lamu (Lamu East)	6	542	982	105	120	12	4
Mandera (Mandera North & West)	6	120	720	2480	12	12	12
Marsabit (North Horr & Moyale)	3	50	50	62	68	3	3

Lower Juba (Afmadhow & Badhadhe)	9	520	3140	230	54	27	35
Nairobi (Kamukunji)	25	64501	64501	323	64001	0	0
Turkana (Loima, Kibish, Turkana West)	12	36	36	17	0	0	12
Wajir (Wajir East, North & South)	5		5981	1058	1058	11	11
Total	75	66234	78050	4795	65493	110	122

Seventy-five (75) community mobilizers from the 8 CGPP supported areas which reported in week 42 participated in community mobilization activities. A total of 66,234 HH visited, 78,085 families reached, 4,795 children <5 years reached routine immunization and surveillance messages. It is also worth mentioning that the CMs were able 65,493 one on one contact, 110 group meetings, and 122 social mobilization activities carried out along the border and nomadic settlements

Defaulter tracing

Community Mobilizers conducted defaulter tracing from 7 (88%) out of the 9 Counties/Regions which reported this week and managed to trace 300 children who had defaulted Immunization. The highest number of children 95 (32%) were traced in Garissa County while Wajir County did not conduct any defaulter tracing

Cross-Border

Table 2: Cross-border meetings and vaccination posts.

County/Sub-county	CBHC Meeting	CBHC meeting regularly	No. special vaccination Posts	Functional special vaccination posts	No. of vaccination border posts	No. of vaccination transit route post
Grissa (Dadaab, Fafi, Hulugho)	Monthly	3	8	5	4	2
Lamu (Lamu East)	Monthly	10	0	0	0	0
Mandera (Mandera North & West)	Monthly	1	0	0	6	0
Marsabit (North Horr & Moyale)	No committee	0	0	0	0	0
Lower Juba (Afmadhow & Badhadhe)	Monthly	2	4	4	3	1
Nairobi (Kamukunji)	No committee	0	0	0	0	0

Turkana (Loima, Kibish, Turkana West)	Quarterly	1	1	1	1	1
Wajir (Wajir East, North & South)		1	11	11	5	5
Total		19	24	21	19	9

According to table 2 above, Marsabit and Kamukunji facilities have no CBHC in place. During the reporting week, 6 (75%) out of the 8 CGPP supported area reported having 19 active Cross-Border Health Committee meeting held. The CBHC meeting takes place on a monthly basis according to 4 (50%) of counties visited. Twenty four special vaccination identified although only 21 (88%) being functional. Worth mentioning that 9 vaccination transit route was available during the reporting week.

Objective 3: Support supplemental polio immunization activities

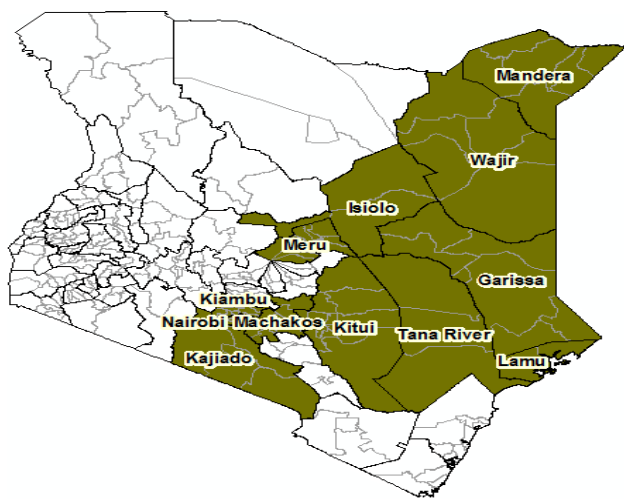


Fig.8 :Cross border vaccination team supported by CGPP at Eymole Kenya /Ethiopian border

Fig.7 : Counties involved in OBR 4 (October 2018)

A total of 2,827,029 children < 5 years were target for bOPV vaccination. CGPP partner support to the County Health management team Included financial, training, allocation of the additional team and social mobilization, The CGPP team are also involved in Independent monitor and LQAS assessment. The results of the SIA will be captured in week 43 update.

Objective 4: Support efforts to strengthen AFP surveillance

Active case search Visits using ODK Integrated Support Supervisory Checklist 2018

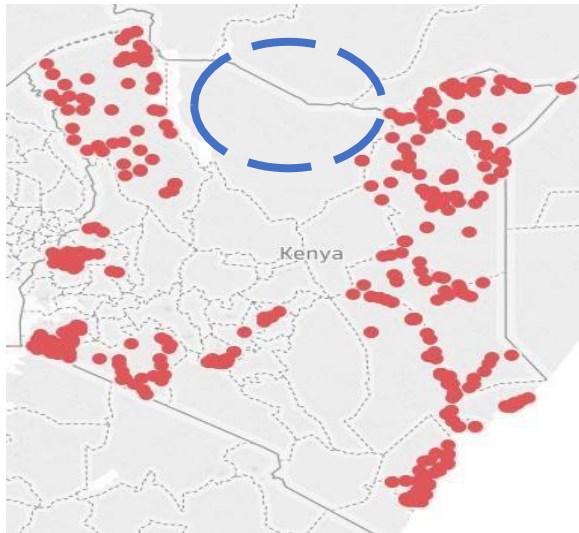
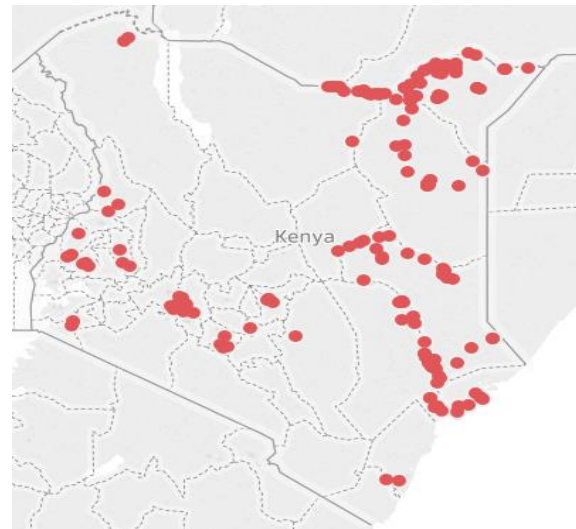



Fig.9: Past 1 Month, 01 - 30 Sept.


 Fig.10: Past 3 week, 1st – 21st October 2018.


 The area where supervision using ODK not conducted

Integrated Support supervision (ISS) was carried out in 7 out of the of 8 reported GCPP supported area of Turkana, Garissa, Marsabit, Mandera, Wajir, Garissa and Lamu County using ODK in the first three weeks (01-21st) October 2018. A total of 188 facilities visited, and it is worth noting that no Integrated support supervision using took place in Nairobi County (Kamukunji).

The digitized Integrated support supervision (ISS) tool to be used by the Somalia team has been finalized and deployed on the ONA platform and shared with the Lower Juba and Gedo region.

Active Case search

Table 4: Active case search conducted in CGPP supported area

County/Sub-county	# CMs engaged	# HH visited	# males reached	# Females reached	# AFP reported by CMs	Silent Area	# AFP cases reported by Nomadic	Capacity Building	
								Male	Females
Grissa (Dadaab, Fafi, Hulugho)	9	465	2860	1900	0	0	0	25	10
Lamu (Lamu East)	6	542	54	124	0	0	0	5	1
Mandera (Mandera)	6	6	850	920	0	0	0	22	0

North & West)									
Marsabit (North Horr & Moyale)	3	71	25	46	0	0	0	14	4
Lower Juba (Afmadow & Badhadhe)	9	520	3200	0	0	0	0	45	15
Nairobi (Kamukunji)	0	0	0	0	0	0	0	20	5
Turkana (Loima, Kibish, Turkana West)	12	36	167	157	0	16	0	0	0
Wajir (Wajir East, North & South)	3	5981	571	487	0	2	0	3	0
Total	48	7621	7727	3634	0	18	0	134	35

Forty-eight (48) community mobilizers took part in active case search and managed to visit a total of 7,621 households, 11,361 persons (Male 7,727 (68%) and Females 3,634 (32%) reached with Routine Immunization, and Surveillance messages. No case of suspected AFP found during the active case search. Regarding Capacity building on Routine Immunization and Surveillance a total of 169 persons (Males 134 (79%) and females 35 (21%) trained.

Security

Marsabit county is volatile; there were ethnic clashes, hence disrupting planned activities

Planned activities week of October 22-28, 2018.

- Participate and support bOPV round two for Garissa, Lamu, Wajir, and Mandera Counties.
- Conduct LQAS and IM for the bOPV campaign i
- Finalize submission of annual report to the Secretariat
- Participate in Joint Supervisory visit by MOH
- Active case search and defaulter tracing.
- Dissemination of community mobilizer contracts
- Community dialogue sessions on RI, AFP case detection