POLIO SURVIVOR STRIVES AMIDST HER PAST TURMOIL AND HOPES FOR A POLIO FREE SOUTH SUDAN

By Jemima Tumalu, CGPP Communications Officer

For the past two years of her 39-year-old life, Akujo Mary has used a wheelchair she was given by an organization. Prior to that, she would crawl on her knees to get around since being diagnosed with polio when she was 8 months old.

"Communities have realized that disabled people like me have talents and abilities just like others," she said, despite her own need to overcome those stigmas even from within her family. "My mom said I was disabled, useless, and only a burden. When my husband asked for my hand in marriage, not only was my family shocked but the community was too. I gave my life a chance and wanted to turn a new leaf and forget my childhood trauma."

All four of her siblings born before Akujo died at birth, and this tormented her family. "My birth was like a miracle that my parents did not expect. I was not taken to the hospital for routine immunization, as my parents thought I would not make it after a year." But Akujo is a survivor. Not only did she live, but she has thrived. After moving to Yei town with her late husband who was a businessman. Akujo a member of one of CGPP’s mother-to-mother support group in her area learnt about the importance of immunization for mothers and their children. She gave birth to three children of her own. Her children would have a different future than she did. She started going to the hospital for her TT vaccine.

“I birthed my children at the hospital, and all of them were vaccinated and completed their doses. I wanted them to be normal and free from social stigma.”

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Akujo believes that during her mother’s time, mothers did not meet to discuss about their health and that of their children. Communities lacked information and were not enlightened about the vaccine-preventable diseases like polio, measles, yellow fever and others. Akujo has seen the difference first-hand. “Now things are different because community workers come to our homes to vaccinate our children and educate us about the common sicknesses that affect our children and the importance of routine immunization during our mother-to-mother group meetings. We can also easily access the hospitals and also have conversations with other mothers unlike in the 20th century.”

With support from the United States Agency for International Development (USAID), CGPP is supporting integrated community-based surveillance for acute flaccid paralysis (AFP) and other infectious diseases and events such as measles, yellow fever, Ebola virus disease, COVID-19, and adverse effects following immunization. CGPP also supports strengthening of immunization systems to achieve polio eradication in South Sudan through the mother group meetings for immunization demand generation, tracing and tracking of immunization defaulters and unvaccinated newborns, referrals of defaulters, newborns and pregnant mothers to the nearest vaccination sites and support quarterly periodic intensification of routine immunization outreach sessions.

The profits she made from selling vegetables and other foodstuff, Akujo used to send her children to school, feed them and even support her parents. “I am saving money for my first child to do engineering at the university and I’m saving to start another business,” she says. “I am sure some children are not vaccinated from birth and are not paralyzed but the vaccines are good for children’s immunity. Disabled and paralyzed children should be taken care of. These abandoned children could be ministers of this country in future. Only God knows their fate”, she says.

Disabled and paralyzed children should be taken care of. These abandoned children could be ministers of this country in future. Only God knows their fate. I advocate for every paralyzed person to be given a wheelchair to ease their movement and to be sent to school to realize their dreams.

—Mary Akujo, a 39-year-old polio survivor advocates for a polio-free South Sudan

CORE GROUP PARTNERS PROJECT RESPONDS TO MYTHS AND MISCONCEPTIONS ABOUT COVID-19 VACCINES TO RELIGIOUS LEADERS

By Jemima Tumalu, CGPP Communications Officer

Since the onset of the COVID-19 pandemic in South Sudan, many faith-based leaders have shunned COVID-19 vaccines for various reasons. Concerns about the vaccine’s origin, a lack of trust in political leaders, and a lack of confidence in the vaccine’s efficacy have been shared. Myths and misconceptions that suggest the vaccine could cause infertility and fear of the number 6666, which some people relate to Satan were expressed by church leaders.

“There is no hurry in the work of God. We are not for ourselves but for God and his people. That is why we need to lead by example," Evangelist James Khamis says. He says that most of his congregation and community members are not vaccinated. People are worried, he says, because they have heard myths and misconceptions relating to the COVID-19 vaccine.

James believes that as church leaders, one of their roles is to engage the health experts to share the facts about the COVID-19 vaccine. "It is our responsibility to live by example and disseminate the right information. It is for this reason that I decided to get vaccinated today after the World Vision team from Juba clarified some of the misinformation on the COVID-19 vaccines during the training," he says. James believes that if most church leaders are vaccinated, church members will not object to the vaccines since they look up to them as their spiritual leaders and role models. He requested the Ministry of Health to make efforts to take the vaccines to the churches.

According to CORE Group Partners Project Deputy Director, Dr. Rumbe Samuel, misinformation, oversaturation of wrong information through social media, lack of right information related to COVID-19 vaccines, and inadequate engagement of the religious leaders in South Sudan in matters related to COVID-19 outbreak responses have resulted in high vaccine hesitancy.

CGPP PARTICIPATES IN MEETINGS TO BUILD EFFECTIVE PARTNERSHIPS WITH DIFFERENT STAKEHOLDERS

CORE Group Partners Project (CGPP) South Sudan and partners at national and subnational levels participated in several technical working group meetings such as risk communication and community engagement, expanded program for immunization, epidemic preparedness and response, and the national COVID-19 vaccination campaign.

Other forums included COVID-19 operations meetings and public health national steering committee meetings, CGPP’s quarterly review, CGPP-USAID global calls, and monthly USAID implementing partners’ coordination meetings.

On February 15, 2023, CGPP participated in a training organized by USAID at Goshen House and facilitated by MELS on USAID health compliance. The training centered on regulations and legal issues involved in using USAID funding, abortion restrictions, HIV policies, compliance monitoring, and PEPFAR guidance on the use of funds to support FP/HIV integration.

On February 21, 2023, our CGPP director made a presentation to a team of M-RITE and Ministry of Health officials in the Democratic Republic of Congo to share experiences on the integration of COVID-19 into routine immunization. The discussions focused on elements, processes, benefits, challenges, and recommendations for integration.

Religious leaders lining up to get vaccinated against COVID-19 during a religious leaders training in Torit County in Eastern Equatoria State
**POLIO ERADICATION EFFORTS**

A suspected AFP case in Nimule, Maqwi County

CGPP supports strengthening of immunization systems to achieve polio eradication in South Sudan through the following strategies:

- Mother group meetings for immunization demand generation.
- Tracing and tracking of immunization defaulters and unvaccinated newborns.
- Referrals of defaulters, newborns and pregnant mothers to the nearest vaccination sites.
- Support quarterly periodic intensification of routine immunization outreach sessions.

**ACHIEVEMENTS IN CBS**

CGPP supports integrated community-based surveillance (CBS) for:

- acute flaccid paralysis (AFP)
- measles
- yellow fever
- Ebola virus disease (EVD)
- COVID-19
- adverse effects following immunization (AEFI)

**COVID-19 OUTBREAK RESPONSE**

World Vision received funding from UNICEF, the World Vision-led CGPP and its partners SPEDP and OPEN implemented a National Covid-19 Vaccination Campaign (NCVC) in 25 counties in the States of Central Equatoria, Eastern Equatoria and Western Equatoria, and Upper Nile with the following activities implemented.

- 153,572 (49.8% female 50.2% male) above 18 years were vaccinated in 22 counties.
- A total of 30,115 individuals 18 years above received booster doses of the J&J vaccine.
- Conducted joint supervision involving national supervisors from the Ministry of Health (MOH), State ministry of Health (SMOH), County Health Departments, United Childrens Fund (UNICEF), Johnsnow Institute (JSI) and AFFENET in Mundri East, Mundri West, Kajo Keji East, Juba, Yei, Yambio, Ibba, Maridi, and Terekeka counties.

153,572 vaccinated for COVID-19
76,479 female + 77,093 male

30,115 received booster doses for COVID-19

**RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)**

CGPP implemented RCCE mainly through house-to-house visits and visits to social places such as markets, water points, churches/mosques, funerals, parties, cattle camps and sports grounds etc. During these sessions, community members aged 15 years and older are given awareness on various infectious diseases.

- 93,738 house-to-house visits
- 77,758 social places visits

171,496 individuals 15+ reached with key messages on priority diseases
SUPPORTIVE SUPERVISION

Angelo Ngor a project coordinator for Eastern Equatoria State interacting with project supervisors and home health promoters during supportive supervision.

The objective of the support supervision is to improve the quality of programming and build the capacities of field teams through quarterly mentorship. During the month of February, CGPP provided support supervision to:

- **8 (all males)** project supervisors in Budi, Ikwotos, Juba, Kajo-Keji, Yei, Mundri West, Mundri East and Mvolo counties.
- **328** home health promoters (**82 females | 246 males**) were supervised by project supervisors across the 24 counties.
- **3,525** community key informants (**1,783 females | 1,742 males**) received mentorship visits.

**Achievements in the Ebolavirus disease readiness activities:**

- **Screened 67,700 (29,925 females | 37,775 males)** travelers in 10 POEs for fever as a major sign of Ebola virus disease with 446 (**218 females | 228 males**) people detected with high fever (temperature of 38°C) and referred for secondary screening. The further secondary screening revealed that none of those referred were suspected EVD alerts.

EBOLA VIRUS DISEASE READINESS ACTIVITIES

Following the EVD outbreak in Uganda in September 20, 2022, CGPP in collaboration with the national incident management system of the Ministry of Health instituted EVD readiness activities. The readiness activities were implemented in 11 high risk counties of South Sudan namely, Yei, Morobo, Kajo-Keji, and Juba in Central Equatoria State, Magwi and Torit in Eastern Equatoria State and Maridi, Yambio, Nzara, Ezo and Ibb in Western Equatoria State in collaboration with the Ministry of Health. The activities included point of entry screening, RCCE, community-based surveillance and coordination guided by national Ebola virus disease preparedness, readiness and response plan September 2022 through August 2023.
UPCOMING PLANNED ACTIVITIES

- Finalize the second round of the national COVID-19 vaccination campaign in 25 counties in the month of March 2023.
- In collaboration with the State Ministry of Health and the county health departments conduct Periodic Intensification of Routine Immunization (PIRI).
- Participate in CGPP workshop and retreat in Mombasa-Kenya from 20-24 March 2023.

OUR PRESENCE IN SOUTH SUDAN

Western Equatoria
- World Vision South Sudan

Central Equatoria
- Support for Peace & Education Development Program (SPEDP)

Eastern Equatoria
- Organization for Peoples Empowerment & Needs (OPEN)

ABOUT CGPP SOUTH SUDAN

CORE Group Partners Project is funded by USAID. CGPP South Sudan is advancing community health through the establishment of a robust integrated community-based surveillance (CBS) to timely detect and report suspected cases of acute flaccid paralysis for polio, measles, COVID-19, Ebola virus disease, yellow fever, and adverse events following immunization. The CGPP CBS network comprises of 29 project supervisors at the county level, 540 home health promoters at the boma level, and 5,096 community key informants at the village level. CGPP implements its activities in the 26 counties of Eastern, Central, Western Equatoria and Upper Nile States. Our interventions focus on:

- Integrated community-based surveillance on acute flaccid paralysis, measles, yellow fever, COVID-19, EVD and Adverse Events Following Immunization,
- Polio supplementary immunization campaigns.
- Immunization systems strengthening.
- COVID-19 outbreak response.
- Ebolavirus disease readiness.

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