Multiple campaigns held in 2022 in Somalia to kick off polio outbreak response

Somalia has one of the world’s longest-lasting circulating derived poliovirus type 2 (cVDPV2) outbreaks, (SOM-BAN-1 emergence) from Banadir region, with international spread to Kenya and Ethiopia, in circulation for almost 7 years. With the priority now being to eradicate polio, the Polio Eradication Strategy 2022-2026 goal no. 2 indicates blocking the cVDPV transmission and preventing outbreaks in non-endemic countries. To achieve this, the Federal Government of Somalia, with the support of CORE Group Partners Project HOA, the World Health Organization, and other Global Polio Eradication Initiative partners recommitted to stopping the ongoing outbreak of circulating poliovirus type 2 (cVDPV2) in Somalia, endorsing the Somalia Polio Eradication Action Plan (SEAP) 2022 to reaffirm their commitment.

With one of the main objectives being to conduct several national and subnational immunization days (sNID/NIDs) and to ensure quality SIA campaign conducted, Somalia has conducted a total of 6 campaigns in 2022, to increase children’s immunity.

NOTE FROM OUR DIRECTOR

I am happy to introduce to you our newly revised quarterly newsletter. With gratitude toward the CGPP staff and USAID, I am excited to share with you the many avenues our project is involved in to serve the marginalized communities in the hard-to-reach locations in both Kenya and Somalia. Thank you for the ways you partner with us!

Somane Mohamed
CGPP Secretariat Director, Horn of Africa

FIND INSIDE:

PAGE 2
Integration of Outreach Services in Turkana County leads to Changed Mindsets of Community Members

PAGE 3
Drought in Somalia Worsens
Teambuilding sessions for GHS advisors

PAGE 4
One Health coordination between Kenya and South Sudan

PAGE 5
Ellyn Ogden visits CGPP Kenya
Yellow fever campaign in Kenya

PAGE 6
Simulation exercise
Changes in CGPP HOA leadership

PAGE 7
2022 Conferences
Integration of Outreach Services in Turkana County led to Changed Mindsets of Community Members

By Abubakar Salah, CGPP Communications Coordinator and Joshua Rutto - IRC Kenya, former Program Manager

Arii Ekaale, a 32-year-old mother of three, lives in Morukoki, a high-risk, hard-to-reach cross-border area seven kilometers, an hour and a half walk, from the nearest health service centers filled with insecurity, limiting her and her community members access to quality health services. She recalls Abei Ekai, who had previously lost a baby delivered by a traditional birth attendant in her sub-county. This creates fear in safe and hygienic deliveries and the health of mothers and their children.

"One early morning, I heard Kokuro’s community mobilizer Mr. James Natelo announcing that they had organized for an integrated community outreach session at the famous gathering point in our village, Morukoki," Arii said. This piqued her interest as the CM informed her that the health team was also bringing antenatal care, maternal neonatal and child health services including routine immunization, COVID-19 vaccination, and other services such as nutrition to the community.

In order to prevent vaccine-preventable diseases among children and high maternal morbidity rates while addressing other community health issues, CGPP—implemented by International Rescue Committee (IRC) and funded by the United States Agency for International Development (USAID), in collaboration with the Turkana County government and partners—organizes and implements low-cost integrated outreach sessions. For example, the session Arii joined was implemented after a joint quarterly work planning and coordination meeting in January, held by Turkana’s sub-county health management team in Kibish. As a result, partners such as CGPP and Kenya Red Cross Society (KRCS) agreed on a joint outreach service that was aimed to improve access and quality of health service delivery by identifying existing gaps and developing strategies to address vaccine-preventable diseases, high vaccination defaulters and low COVID-19 vaccines uptake in the county.

At the outreach sites, Arii and other community members received health education talks on various health topics. Since it was Arii first COVID-19 vaccination dose, she also received some medicine to curb the side effects of the vaccine. On immunization of children, health workers advised the community to adhere to the routine immunization schedule as well as COVID-19 vaccination for those that received vaccines that require two doses.

"Prior to these health talks we thought that vaccines were not safe regardless of the ones taking them. Especially for COVID-19 with how fast it came out, we weren't sure we could trust it.” She continued, “I personally also thought that traditional birth assistants were working closely with health care workers in the community until I was educated about the dangers of TBA delivery. Now I know the advantages of delivering at the health facility and the advantages of vaccines.”

—Arii Ekaale, community member

Initially, partners supported outreaches by working in isolation, leading to low coverage while the scope of the health service provided was limited. With the concept of integrating different health services provided by different stakeholders, coverage and access have improved, distance is minimized, reduced cost, and a broadened variety of services are provided. This joint effort reduces the prevalence of communicable, respiratory, and nutritional deficiency diseases, which are among the most common disorders reported in pastoral and migratory communities.

On returning home, Arii urged her neighbors to accompany her for the next outreach visit. Since the project supports two outreach sessions per facility, and with support from the county government and other partners, the number of community members who returned for the subsequent outreach services increased. Most of them received their COVID-19 jabs while children were put on track with a routine immunization schedule.

Through the coordination of the Subcounty team, CGPP’s collaboration with KRCS reached a total of 291 children under 5 years with various immunization antigens, while also reaching 301 people with COVID-19 vaccination in Kibish subcounty. Furthermore, a total of 616 people were immunized with COVID-19 during the outreaches in Turkana supported by CGPP and KRCS.

| 161 | 130 | = 291 | children under 5 reached with various immunization antigens |
| 144 | 157 | = 301 | COVID-19 vaccinations given in Kibish Subcounty |
| 354 | 262 | = 616 | more COVID-19 vaccinations given during outreaches in Turkana (not including Kibish Subcounty) |

“During the joint work planning meeting, partners such as CGPP and KRCS agreed to conduct integrated outreach services. This synergy ensured cost was minimized and health service delivery was extended, reaching many community members.” —Sylvester Auko, Kibish Subcounty Disease Surveillance Coordinator
Drought in Somalia worsens

The humanitarian situation in Somalia continues to deteriorate alarmingly due to the prolonged drought. An estimated 6.7 million people face severe food insecurity, including 2.2 million people who are likely in an emergency (IPC Phase 4) and at least 300,560 people who will likely be in a catastrophe (IPC Phase 5) by the end of the year. Children, pregnant and lactating mothers are among the most severely affected. By July 2023, 1.8 million children may suffer from acute malnutrition, and 513,550 are likely to be severely wasted, with famine (IPC Phase 5) is projected among agro-pastoral populations in Baidoa and Burhakaba districts and displaced people in Baidoa town of Bay region in southern Somalia, where malnutrition and mortality levels are already very high.

45 percent of the population are acutely food insecure

Displacement - led to epidemic prone diseases, particularly acute diarrheal disease, and measles

An estimated 1.5 million children under 5 years face acute malnutrition

Somalia’s population at risk of famine if failed rains continue through out 2023

7.7 Million people in need of humanitarian assistance in Somalia

Source: MOH

Team Building Session for Global Health Security Advisors

CGPP Global Health Security Advisors from HQ, Kenya, Ethiopia, and Nigeria conducted a team-building session on June 2022. The purpose of the session was to share experiences, expertise, and lessons learned from the implementation of the GHS activities in the respective countries, benchmark GHS activities of selected implementing partners in Kenya, especially on the establishment of One Health Coordination mechanisms, the Care Group model, community-based surveillance, among others. The sessions encouraged communication, integrated teamwork across countries, and built trust among the GHS advisors as well as documented common challenges, opportunities, and ways forward.

The team visited Lamu County, where they were joined by CGPP Global Director Hibret Tilahun, and the Global Deputy Director Ahmed Arale. During the visit, the team took part in various activities such as supervision, community dialogue, and sensitization meetings.
To improve surveillance and reduce transboundary disease outbreaks, cross-border coordination and collaboration between bordering countries is vital in ensuring cross-border communities live a healthy life.

In an effort to improve access to animal, human and environmental health across Kenya and South Sudan border, CGPP met together with National/County/State Ministries of Health, Ministry of Agriculture, Livestock and Fisheries, Ministry of Environment, Ministry of Interior, WHO, UNHCR and other health partners. The team discussed the surveillance component and integration areas and crafted a joint work plan on the One Health approach in a two-day (March 7-8, 2023) conference in Kakuma, Turkana county. The conference brought together animal and human health specialists to brainstorm and deliberate ways for South Sudan and Kenya border communities, primarily nomadic pastoralists and marginalized, to access quality healthcare services. Speaking while opening the conference in Kakuma, Chief Officer for Preventive and Promotive Health Peter Lomorukai said that working jointly with One Health stakeholders is an important aspect of implementation. Seasonally, pastoralists from both Kenya and South Sudan move across the border in search of pasture and water for their livestock. Additionally, Kenya continues to receive sizeable populations across the border as asylum seekers. All these predispose the region to cross-border disease transmission.

Key deliberation for the meeting were to create a OH cross-border coordination committee at the county and state levels as well as Kapoeta East County and Turkana West Subcounty to share information on the current surveillance situation of vaccine preventable disease, priority zoonotic diseases and other disease of public health importance. The conference was also attended by partner NGO representatives such as USAID/AMREF, Imarisha Jamii Concern Worldwide, UNHCR, WHO, and VSF-Germany. The meeting was supported by CGPP and partners including Turkana County government, Ministry of Agriculture, Livestock and Fisheries and Ministry of Health.

CGPP supports One Health Cross-border Coordination Meeting

Between Kenya and South Sudan in Turkana County, Kenya

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CGPP rebrands

CGPP continues to be pivotal in supporting polio eradication through community-based surveillance in high-risk, hard-to-reach areas. Utilizing the polio infrastructure CGPP has created and maintained over 20 years, the project has adapted to broaden its portfolio. Effective October 2022, the project name CORE Group Polio Project changed to CORE Group Partners Project. Approved by USAID considering the project’s involvement in various project activities such as the Global Health Security Agenda, COVID-19, and other vaccine-preventable and priority-zoonotic diseases. The team takes the opportunity to thank you for your efforts in collaborating with CGPP throughout the years, helping to advance the health of these communities through various activities. CGPP HOA wishes to continue the same engagements in partnering to advance community health.
I have seen community health workers have so much knowledge, information, and ability to help their communities. It is not easy to walk through the communities trying to achieve what you have at task. I appreciate the health workers going to communities door-by-door and educating people in advancing children’s health. We need a healthy future generation.”

As part of the routine check-up, the concept of GHS was also discussed where the zoonotic diseases were a challenge, especially with many dog bites and suspected brucellosis cases being reported in these facilities. The coordinator requested GHS – PZD messages to be integrated into the community flipbooks to educate communities on matters relating to zoonosis. During the end of the visit, the community health workers gifted Ellyn, showing appreciation for always lobbying in support and ensuring the Kamukunji community has a better and safe environment.

Yellow Fever Campaign in Kenya

Kenya experienced a yellow fever outbreak following a number of suspected cases reported in the county of Isiolo, central Kenya in January 2022. Samples collected had tested positive, confirming yellow fever cases in the county. The last yellow fever outbreak reported was in 2011.

On 4th March 2022, the Ministry of Health Kenya declared an outbreak in Isiolo and Garissa counties after several suspected cases were also reported from the neighboring county of Garissa which is a project area for CGPP. Other suspected cases were reported from ten (10) other counties of, Samburu, Meru, Wajir, Nakuru, Mombasa, Nairobi, Tana River, Turkana, Trans-Nzoia and Laikipia. CGPP, through its implementing partners ALIGHT, participated in community-based activities, supported the training of health workers and community volunteers in preparation for immunizations and participated in yellow fever supplemental immunization (SIA) vaccination campaigns from July 23 to August 2, 2022.

The community mobilizers conducted social mobilization activities where 189,508 persons were vaccinated in the ten days of the SIA. Seventy-two percent of 63,563 target populations got vaccinated against yellow fever. Even though an after-action review was not performed, CGPP volunteers continued with the community engagement activities, where a total of ten community dialogues and sensitization events were held with discussions on zoonotic diseases.
Tabletop Simulation Exercise in Naivasha, Kenya

Conducted over five days, the Naivasha simulation exercise and after-action review (AAR) was the first subnational activity involving experts from the national and county governments, CORE Group Partners Project, FAO, AFROHUN, and other key partners in planning and implementation with overall coordination from FAO.

The team participated in exercise scenarios, depicting a Rift Valley fever (RVF)-like virus outbreak in a high-risk county, triggered by environmental factors and with public health impact on humans and animals, lives and livelihoods, agriculture, trade and trade tourism, peace and security and the economy. This fictitious component featured an RVF virus that mutated into a pathogen transmitted between humans, causing severe hemorrhagic fever and resulting in increased cases and deaths requiring intercounty and national referrals.

Using the One Health approach allowed for assessing and building capacities to prepare and respond to viral hemorrhagic fever. The AAR was conducted using a recent RVF outbreak investigation case study in Mandera County. The entire AAR exercise was facilitated by experts from Core Group Partners Project appointed by the exercise management team (EMT); they were assisted by other facilitators drawn from Zoonotic Disease Unit and County One Health Unit.

This training contributed to the One Health Workforce development by enhancing epidemiological competencies of the national and subnational multi-sectoral workforce in line with zoonosis and human resource action packages of the GHSA and the WHO Monitoring and Evaluation framework of the IHR (2005).

"When we protect one, we protect all."

Changes in CGPP-HOA leadership

CGPP wishes to congratulate Ahmed Arale who has transitioned from CGPP Horn of Africa secretariat director and now as the new CGPP Global Deputy Director/Technical lead.

In his position, Somane Mohamed occupies the Horn of Africa secretariat director position. Warmest congratulations on their achievements!

CGPP-HOA welcomes Josephine Ihahi as its newest member, serving as the Deputy Director.
Global Health Practitioner Conference 2022

Transforming the Global Health Landscape conference was held by CORE Group Inc. from October 3-5 in Bethesda, Maryland. The conference brought together specialists in the field for the first time in three years. Over 200 individuals from 21 nations attended the conference. Participants participated in a variety of interactive sessions and activities that addressed current global health concerns, such as localization, and ways to make sure that investments and working methods in global health change to take into account the shifting circumstances.

During the conference, CORE Group Inc. celebrated its 25th anniversary with a vibrant reception that brought attendees down memory lane while examining the expansion, difficulties, and contributions CORE Group has made to improving community health throughout the world.

Social and Behaviour Change Communication Conference 2022

The SBCC Summit 2022 was held by John Hopkins University from December 5-9 in Marrakech, Morocco. The summit took place to reflect on how to use SBCC to tackle global challenges. The ways in which the globe communicates continue to evolve rapidly in our increasingly interconnected and mediated world. In this context, informed and engaged participation in social and behavior change, and public discourse more broadly, is especially relevant.

CGPP held in an auxiliary event on "Building Resilience to Unravel Misinformation in Human and Animal Health: a CGPP Experience in One Health Communications." The main objective was to share the identified common myths and misinformation that have prevented advancements in both human and animal health. The team used case studies to tackle misinformation such as the Rift Valley fever outbreak in Kenya, routine immunizations, and suspected polio cases in Ethiopia and South Sudan.