Update on South Sudan’s preparedness and response readiness capacities
<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Time</th>
<th>Responsible person</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>• Self-Introduction&lt;br&gt;• Communication from the Hon. Minister</td>
<td>2:00-2:05 pm</td>
<td>Dr Riek Gai Kok</td>
</tr>
<tr>
<td>2</td>
<td>Review of action points from previous meeting</td>
<td>2:05-2:20 pm</td>
<td>Dr Lul Lojok – Ag IM</td>
</tr>
<tr>
<td>3</td>
<td>Proposed composition &amp; TORs for the NTF and TWGs</td>
<td>2:20-2:35</td>
<td>Dr Wamala</td>
</tr>
<tr>
<td>4</td>
<td>• Latest Update on EVD outbreak situation in DRC&lt;br&gt;• Epidemiology, Surveillance and Laboratory status in South Sudan</td>
<td>2:35-2:45 pm</td>
<td>Dr Ifeanyi</td>
</tr>
<tr>
<td></td>
<td>Discussion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Updates on EVD TWGs per thematic areas:&lt;br&gt;• Current Status/progress made&lt;br&gt;• Update from STFs&lt;br&gt;• Update from Health Cluster</td>
<td>2:45-3:20 pm</td>
<td>TWGs leads &amp; Co. leads</td>
</tr>
<tr>
<td></td>
<td>Discussion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>A.O.B</td>
<td>3:20-3:30 pm</td>
<td>All</td>
</tr>
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</table>
### Key action points from meeting held NTF: 25/10/18

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
<th>Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Conduct joint support supervision at JIA</td>
<td>MoH/CDC/WHO</td>
</tr>
<tr>
<td>2</td>
<td>Develop a checklist for a comprehensive schedule for support supervision at all PoE</td>
<td>BH/PoE TWG</td>
</tr>
<tr>
<td>3</td>
<td>Revisit the frequency of NTF meetings to once a week</td>
<td>MoH</td>
</tr>
<tr>
<td>4</td>
<td>Circulate the membership of all TWG</td>
<td>Secretariat</td>
</tr>
<tr>
<td>5</td>
<td>TWG Lead/Co-Lead to meet with the IM</td>
<td>TWGs</td>
</tr>
<tr>
<td>6</td>
<td>Develop ToR for all TWGs</td>
<td>WHO</td>
</tr>
<tr>
<td>7</td>
<td>Develop a template for TWG reporting to NTF</td>
<td>Secretariat</td>
</tr>
<tr>
<td>8</td>
<td>TWG to update the mailing list with names of focal persons</td>
<td>TWGs</td>
</tr>
<tr>
<td>9</td>
<td>Develop a mechanism to monitor rumors</td>
<td>Risk Comm. TWG</td>
</tr>
<tr>
<td>10</td>
<td>Expand the recipient of EBZ vaccine to include all health workers in prioritized states</td>
<td>Vacc./Therapeutic TWG</td>
</tr>
</tbody>
</table>
Total cases: 300
Deaths: 186
Confirmed: 265
Probable: 35
New cases: 2
   - Beni: 1
   - Kalunguta: 1

DRC: October 2018 data
DRC: Number vaccinated per health zone

No vaccinated

- Beni: 14033
- Mabalako: 4436
- Katwa: 2151
- Mandima: 1663
- Butembo: 1435
- Masereka: 690
- Bunia: 434
- Kalunguta: 407
- Tchomia: 355
- Komanda: 240
- Oicha: 178
- Mutwanga: 150
- Musiene: 160
- Vuhovi: 130
Coordination

- Vaccine expert and Incident Manager are in-country.
- 6 consultants (Epi, CM, IPC, Risk Comm. & Coordinator) have been deployed to high risk states.
- Weekly STF meetings in Torit, Wau, Yei, and Yambio
- Still no updates from Jubek state
- All SOPs to be validated next week; 13th to 15th Nov
993 staffs of different categories trained on EVD preparedness and response. These include;

- RRT: 269
- IDRS: 227
- Orientation for taskforce: 136
- Risk communication: 117
- Points of entry screening: 93
- Surveillance and contact tracing: 80
- SDB: 31
- Case Management/IPC: 21
- Biosafety, Ebola RDT/GeneXpert: 19
Surveillance Updates

- Reviewed and finalized the case definition for EVD
- Ongoing RRT training in Torit; 3rd - 7th Nov
- Ongoing RRT training in Yambio; 29th Oct - 2nd Nov
Yambio Alert...1/2

Background

- Deputy Governor of Gbudue State originated the alert on Sunday 21st Oct at 05:20pm
- An in-patient, a 32 year old male from Hai –Sura (21) Northwest Yambio
- History of bloody diarrhea, headache, and fever (38.2°C); no travel history to DR Congo; no history of contact with suspect or confirmed Ebola case.
- Not notified to the national MoH/PHEOC/WHO in Juba.
- Case was investigated by the state surveillance officer alone without any other RRT member
- Blood sample collected in a syringe and transported in a syringe
- Case did not meet case definition
Yambio Alert...2/2

Gaps

- Knowledge gap on Ebola case definition and the sample to collect for bloody diarrhea
- No immediate notification to MoH, PHEOC, and WHO.
- No Ebola sample collection techniques
- Sample delivered to NPHL on 24th October 2018 after 72 hours of collection
- Inappropriate packaging of suspected Ebola samples.
- RRT training in Yambio not yet conducted as at 21st October 2018.
Alert 1
- On 29/10/18, 10:00am: 6 year old boy identified at Nimule checkpoint with temp 38.4°C
- A Ugandan family, resides in Elegu, Uganda borders Pageri County
- Child has been ill since 25/10/18
- Treated with anti-malaria at home
- Fever and headache persisted
- Referred to hospital
- RDT for MP was negative at Nimule hospital
- Temp 38.2°C & 39.1°C at 12:50 pm
- Temp 36.4°C at 16:00 hours
- Child isolated in a room in the hospital
- Sample collected

Alert 2
- On 29/10/18, a 9 year old boy lives in Nimule Motoyo area
- Mother reported at screening desk at 10:00 am
- Child had fever, headache and nose bleeding
- Onset of nose bleeding – 28/10/18
- Screening desk referred him to Nimule hospital
- Sample collected
## Nimule Alerts...2/2

### Strengths
- Surveillance is active
- Immediate reporting of the alerts to MoH/EOC/WHO
- Screeners are aware of referral to secondary screening points
- Availability of sample collection kits and triple packaging materials
- Adequate knowledge of sample collection and packaging

### Weaknesses
- Delayed sample delivery to Juba.
- No alternative sample delivery mechanism
Border health and points of entry update

Border crossing point
- 39 identified
- 14 prioritized
- 14 functional

Screening of Int. travelers
- 418,805 screened
- 16 alerts

Ebola isolation center
- 10 identified
- 0 functional

Designated Ambulance
- 10 needed
- 0 available

South Sudan: Points of Entry Screening for EVD, Week 43 of 2018

Legend
- Border crossing point
- Lead partner
- Number of people screened
- EVD high risk areas

EVD Update in DRC as of 2nd Nov 2018
- 293 cases
- 182 deaths
- 258 confirmed
- 35 probable
Border health and points of entry update

- Developed and shared a supervisory checklist for BH&POEs with TWG members to review
- Scheduled a joint supervisory visit to JIA on Friday 9.11.18
- IOM is working opening two additional screening points in Pure and Korijo IDP camp
- Developed and shared a POE matrix tool online to track POE activities
Area of focus

- Task Tracker
- SOPs
- Setting up Isolation facilities
- Frontline health care facility strengthening
- Psychosocial issues in EVD
Task Tracker: Progress from 16 & 23 Oct

1. Letter from National MOH to State MOH, to include:
   • Name of the facility identified for Isolation Facility
   • Name of the Implementing, Logistics and Technical Partner
   • Design specifications for Isolation facility
   • Request for support and coordination
   • Request for land space identification at the designated facility and relevant approvals as well as communications to NSS, SSPDF, Police and other stakeholders

2. Recommend participation of
   • Health Cluster lead / representative in the Case Management TWG meetings
   • Implementing, Logistics and Technical partner representatives in the Case Management TWG meetings

3. Agree upon timelines for setting up Isolation Facilities:
   • Need to identify new facility for Jubek
   • Trainings proposed to start from 29 October 2018

4. Isolation facility tent set up:
   • WFP has delivered Tents at all the above States except Juba
   • Phase-I facilities set up in Yei and Nimule
SOPs

- TWG level review of SOPs completed last week
  - Hand Hygiene
  - Isolation facility
  - IPC
  - Screening and Triage of patients

- Training tool kits and Job aids
  - Work in progress
## Isolation Facility – Status update

<table>
<thead>
<tr>
<th>Site / Location</th>
<th>State</th>
<th>Implementing Partner</th>
<th>TA Partner</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gabad PHCC*</td>
<td>Jubek*</td>
<td>IMC / Health Link</td>
<td>IMC</td>
<td>No Progress</td>
</tr>
<tr>
<td>Yei Civil Hospital*</td>
<td>Yei*</td>
<td>AAHI</td>
<td>SP</td>
<td>Phase-I established</td>
</tr>
<tr>
<td>Morobo County Hospital</td>
<td>Yei</td>
<td>AAHI</td>
<td>SP</td>
<td>No Progress</td>
</tr>
<tr>
<td>Nimule Hospital*</td>
<td>Nimule*</td>
<td>CordAID</td>
<td>SP</td>
<td>Phase-I established</td>
</tr>
<tr>
<td>Maridi Hospital</td>
<td>Maridi</td>
<td>CUAMM</td>
<td></td>
<td>No Progress</td>
</tr>
<tr>
<td>Makpandu PHCC</td>
<td>Gbudwe</td>
<td>World Vision SS</td>
<td></td>
<td>No Progress</td>
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<td>Tambura</td>
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<td></td>
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</tr>
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<td>Wau Hospital</td>
<td>Wau</td>
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<td>IMC</td>
<td>No Progress</td>
</tr>
</tbody>
</table>

WFP has delivered Tents at all the above States except Juba

*Phase-II proposed; all others Phase-I
Isolation facilities – Samaritans Purse

- Developed a training isolation facility at the rear of the SP compound in Juba
- Training ongoing for Yei and Nimule
- Yei and Nimule have both erected the WFP tents (phase-I Isolation facilities set up)
- Traveling to Yei and Nimule to assess the isolation facility sites, provide site level TA on structure/layout and additional training on managing ‘Special populations’ (children and pregnant women)
Isolation facilities – IMC

- Sites in Jubek and Wau states not finalized
- Given one week time to work with State MOH and State Task Force with support from NTF and WHO State focal persons
Frontline Healthcare Facility Strengthening

- In the process of finalizing comprehensive IPC and WaSH assessment tool
- Proposing for end-to-end strengthening approach:
  - SOP for Frontline healthcare facilities for IPC & WaSH
  - Training toolkit for the frontline health care facility staff
  - Undertake assessment through the Health Cluster partners to use it as baseline information and measure of progress over time
- End to end approach
  - Assessment
  - Staff training
  - Provision of supplies
  - Supportive supervision
Psychosocial issues in EVD

- Discussed and agreed to include Psychosocial issues, survivor stigma issues in the CM-TWG (during the preparedness phase)
- Develop a one page concept note on this topic
- To map the current in-country expertise and experience on these topics and include them into the TWG (consider external support as needed)
Update on SDB TWG

- SDB roundtable discussion conducted 2\textsuperscript{nd} – 3\textsuperscript{rd} November 2018
- SoP finalized, ICRC collated the comments
- Yei SDB joint training ICRC/SSRC/WHO for 6\textsuperscript{th} – 8\textsuperscript{th} November 2018
- SSRC awaiting 2 colleagues to support them on SDB activities
- SSRC finally takes the lead on SDB; with WHO’s technical support
## Isolation Facilities (n=10)

Logistics and IPC/WaSH Partners: UNWFP and UNICEF/WaSH Cluster

<table>
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<tr>
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</tr>
<tr>
<td>Wau Hospital</td>
<td>Wau</td>
<td>CordAID</td>
<td>IMC</td>
</tr>
</tbody>
</table>
Risk Communication TWG

Rumor Monitoring

- A strategy to monitor and manage rumors is under development. It will be shared with UNICEF and the RC TWG by Thursday 8.11.18 for their input.

- Discussions are ongoing with Internews to integrate Ebola related rumor monitoring in their existing network within the PoCs. This will also include engaging the media to monitor rumors.

- The hotline 6666 is also being strengthened to track and monitor the rumors.

- Training of community leaders is also being considered to empower them to monitor rumors.

- The other strategy is to strengthen linkages between the surveillance and the community mobilisers at grass root level.
States’ Update- Yei River State

Activities

- 50 community leaders and other stakeholders sensitized on EVD relevant information (UNICEF, WHO and other partners)
- The STF dispelled an existing rumor among the community leaders that Ebola travels only by water or wind from DRC to South Sudan
- IPC/CM training conducted for 21 clinicians (MoH, WHO, UNICEF, and SSDO).
- There are active on-going humanitarian coordination and STF meetings in Yei state.
- WHO continues to provide technical support to SMoH and ICRC on the installation of isolation facility at Yei hospital.

Challenges

- STF members do not receive NTF meeting minutes

Action Points

- STF members to contact their IT personnel to check the bandwidth of their email
- PHEOC Secretariat to create a google drive link as an alternative dissemination channel
States’ Update- Gbudue, Yambio

Activities

- WFP delivered all the required tents at the prioritized PoEs
- WFP expedites the clearance of emergency preparedness materials from Customs offices.
- State Task Force has developed Ebola preparedness budget on the 29th October 2018.
- The State Task Force meetings are held on Tuesdays and Thursdays weekly

Challenges

- State Task Force requests for: Thuraya phone, VHF radio, bicycles, motorcycles, posters, fliers and banners
- Payment of allowances for SMoH members of staff

Action Points

???
States’ Update- Wau

Activities
- Wau STF identified all required committees.
- Risk comm./Soc. Mob. committee working with WASH cluster in creating awareness on Ebola relevant information.
- The STF resolved to conduct STF and health cluster meetings on alternate schedules (every Wednesday)
- The STF tasked WHO to mobilize more partners to attend STF meetings.
- The STF is planning to reactivate the county taskforce

Challenges
- Some partners are still absent during STF meetings
- Different representations of partners during STF meetings

Action Points
- Partners to nominate a focal person to attend STF meetings.
- WHO to share guiding documents for county task force
Proposed Structure for the EVD TWG TORS
Proposed EVD Organogram

EVD NTF

- Information Management
- Access, Safety & Security
- Logistics & Deployment

Epi & Surveillance
Border Health & POE
Laboratory
Case Management
Risk Coms, Social Mob & Psychosocial Support
SDB
Vaccine, Therapeutics & Research
<table>
<thead>
<tr>
<th>Technical Work Group</th>
<th>MOH Lead &amp; contact</th>
<th>Partner lead &amp; contact</th>
<th>MOH + WHO + Other members / Agency</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination &amp; Strategic Leadership (NTF)</td>
<td>Dr. Richard Laku 0926592520 <a href="mailto:richardlako@yahoo.com">richardlako@yahoo.com</a></td>
<td>Dr. Ayana, Ifeanyi Udenweze, Otim 0926144384 &amp; 0924599692 <a href="mailto:ramadano@who.int">ramadano@who.int</a>. udenwe</td>
<td>Chair &amp; co-chair of the other TWGs</td>
<td></td>
</tr>
<tr>
<td>Epi &amp; Surveillance</td>
<td>Dr. Mathew Tut (MOH) 0916010382 <a href="mailto:tut1988@yahoo.com">tut1988@yahoo.com</a></td>
<td>Dr. Joseph Wamala &amp; Dr. Alice Igale (WHO) 0923362401 <a href="mailto:wamalaj@who.int">wamalaj@who.int</a>.</td>
<td>CDC, UNHCR, IOM, DFID, USAID …etc.</td>
<td></td>
</tr>
</tbody>
</table>
| Border Health                        | Mr. Anyang David Ayuen & Emmanuel Nyawel (MOH) | Derebe Tadesse (IOM) 0921667188 dkintamo@iom.int. Mr. Malick Gai (WHO) 0916664265 gaim@who.int. | WHO, USAID, CDC, Mo-Interior, WVSS, UNOCHA, IOM, UNHCR, AWG, WFP, USAID, CDC, Mo-Interior, SPLA, WVSS … etc. | • Proposing to have someone from Immigration or senior person from MoH  
• Look for a replacement for Malick |
<p>| Laboratory                            | Mr. Abe Gordon &amp; Angelo Goup (MOH) 0929874155 &amp; 0929830530 <a href="mailto:gilyabe@gmail.com">gilyabe@gmail.com</a> &amp; <a href="mailto:majakdegoup99@gmail.com">majakdegoup99@gmail.com</a> | Lisa Carter (WHO) and Dennis Lodiongo (CDC) <a href="mailto:dlodiongo@yahoo.co.uk">dlodiongo@yahoo.co.uk</a>. <a href="mailto:carterl@who.int">carterl@who.int</a> | CDC, Amref, NPHL, Health Cluster …etc. |                                             |
| SDB                                  | Mr. Brian Mamur (MOH)                | Mr. Alex Freeman (WHO)                           | MSF, CDC, IMC, USAID, ICRC, UNICEF, ALIMA, IRC, SCI, UNHCR, IOM …etc. | • Discuss with IFRC and ICRC for an alternate, also get an alternate for Alex |
| Case Management; IPC &amp; WASH          | Dr. Pinyi Nyimol 0916285676 <a href="mailto:pinyiaupur@gmail.com">pinyiaupur@gmail.com</a> | Dr. Henry, Alex Freeman and David Wasambla (WHO) &amp; Samaritan Purse <a href="mailto:hskyob@gmail.com">hskyob@gmail.com</a>. | MSF, CDC, IMC, USAID, ICRC, UNICEF, ALIMA, IRC, SCI, UNHCR, IOM, Samaritan Purse, ...etc. | • Consult with Samaritan Purse for an alternate |</p>
<table>
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<th>MOH + WHO + Other members / Agency</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Mobilization, Risk Communication &amp; psychosocial support</td>
<td>Ms. Mary Dennis &amp; Gloria (MOH) 0921688433 <a href="mailto:mobat43@gmail.com">mobat43@gmail.com</a> 0920304240 <a href="mailto:brillaint83chepkwony@gmail.com">brillaint83chepkwony@gmail.com</a></td>
<td>Mr. Aping kuluel(UNICEF) &amp; Luwaga Liliane (WHO) <a href="mailto:amachuol@unicef.org">amachuol@unicef.org</a>.</td>
<td>UNICEF, USAID, IOM, SSRC ...etc.</td>
<td>• Psychosocial expert to be identify</td>
</tr>
<tr>
<td>Access, Safety; Security</td>
<td>Col. Dr. Kon Paul (SPLA) &amp; Dr. Thomas Madul (MOH) 0929094004 &amp; 0922078961 <a href="mailto:p.konalier@gmail.com">p.konalier@gmail.com</a></td>
<td>Nicholas Hercules UNMISS, Nyakurerwa Enate UNOCHA and Erick Maneigo WHO, <a href="mailto:hercules3@un.org">hercules3@un.org</a> <a href="mailto:nyakurerwa@un.org">nyakurerwa@un.org</a>.</td>
<td>SPLA, UNOCHA, UNDSS, UNMISS ...etc.</td>
<td></td>
</tr>
<tr>
<td>logistics &amp; deployment</td>
<td>Mr. Hillary Hakim and Paul Chol (MOH)</td>
<td>Ms. Fiona Lithgow (WFP) and Mr. Timothy Orie (WHO) 0928458791 &amp; 0922465747 <a href="mailto:oriet@who.int">oriet@who.int</a> <a href="mailto:Fiona.lithgow@wfp.org">Fiona.lithgow@wfp.org</a>.</td>
<td>WFP, UNHAS, UNHCR ...etc.</td>
<td></td>
</tr>
<tr>
<td>Vaccine &amp; Therapeutics</td>
<td>Dr. Anthony Lako (MoH)</td>
<td>Dr Peter Githua (WHO) and Mr Terri Bolagun Charles (WHO), Baboucarr Bouy (UNICEF)</td>
<td>UNICEF, MSF, CDC, DFCA ...etc.</td>
<td>• MOH to identify an MOH lead</td>
</tr>
<tr>
<td>Information Management and resource tracking</td>
<td>MOH</td>
<td>Malick Gai and Jemila Ebrahim, OCHA</td>
<td>WHO, IOM, UNICEF and OCHA</td>
<td>• MOH to identify a focal person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• OCHA to identify a focal person</td>
</tr>
</tbody>
</table>
**Generic TWGs ToRs**

1. **Produce weekly updates during the taskforce meetings on the TWG activities**

2. **Develop and regularly update strategy to enhance preparedness and readiness capacities under the thematic area**

3. **Identify and agree on key priorities in their areas of work**

4. **Based on the strategy developed & update priority activities for the Ebola contingency plan**

5. **Coordinate the systematic implementation, supervision and reporting of thematic area activities that are included in the Contingency plan through meetings; supervision; field visits; evaluations**

6. **Develop and update SoPs to facilitate the implementation of the contingency plan**

7. **Present emerging cross-cutting and policy issues to the inter technical working group meetings**

8. **Support the response to emerging preparedness needs that warrant the competences of the TWG**

9. **Representation at the weekly NTF meetings**
Model state coordination structure will be composed as proposed below

1. State Minister of Health
2. DG State Ministry of Health
3. Director of Community and Public Health
4. State Surveillance Officer
5. State Monitoring and Evaluation Officer
6. State EPI manager
7. State Director Health Promotion and Education officer
8. State Laboratory Focal Point
9. State Director Environmental health
10. Representative of state Ministry of Education
11. Representative of state Ministry of Animal Resources
12. Representative of Urban and Rural water
13. Representatives from Health Partners in the State
14. State security – police; national security; medical corps
Risk Communication TWG Updates

Risk Communication and Community Engagement WG
Partners: MoH, UNICEF, WHO, CDC, IOM, SSRC, HLSS, Internews, REACH & NNGOs
### Name of TWG: Risk Communication and Community Engagement
**Date: 6/11/2018**

<table>
<thead>
<tr>
<th>s/n</th>
<th>On-going Activities</th>
<th>Planned Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Activity</strong></td>
<td><strong>Progress/Achievements</strong></td>
</tr>
<tr>
<td>1</td>
<td>Mass Media Broadcasting of key messages on 18 Radio stations</td>
<td>12,528 Spots aired 62 Talk-shows reaching about 40 Percent population Internews started airing in POCs</td>
</tr>
<tr>
<td>2</td>
<td>Mass Media: Public Address System</td>
<td>Twice a week in Yei in Dar el salam, Maridi road, Kaya road, Gimunu village, Luitaya, Erap, Arise, TTC and Kinji villages, estimated 2400</td>
</tr>
<tr>
<td>3</td>
<td>Sensitization of Community Leaders</td>
<td>280 community leaders oriented in Juba, Yei, Maridi and Wau</td>
</tr>
<tr>
<td>4</td>
<td>Training of Community Mobilizers/HHPs</td>
<td>318 community Mobilizers trained in Yei, Nimule, Maridi, Yambio and Nzara by UNICEF/SMoH/SSRC</td>
</tr>
</tbody>
</table>
## Continued

<table>
<thead>
<tr>
<th>s/n</th>
<th>On-going Activities</th>
<th>Planned Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Activity</strong></td>
<td><strong>Progress/Achievements</strong></td>
<td><strong>Challenges</strong></td>
</tr>
<tr>
<td>5</td>
<td>Training of Community Mobilizers/HHPs</td>
<td>222 community Mobilizers trained in Yei, Nimule, Maridi, Yambio and Nzara by UNICEF/SMoH</td>
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<td>96 HHPs by SSRC in Yei, Nimule and Maridi</td>
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<tr>
<td>6</td>
<td>Trained Community Mobilizers/HHPs conducting house-to-house mobilization</td>
<td>10,564 Households</td>
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<td>1840 HHs reached (4733 people) by SSRC in Nimule, Yei and Maridi</td>
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<td>6000 (36,000 people) HHs reach in Yei</td>
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<td></td>
<td>834 HHs in Yambio</td>
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<td>992 HHs in Nzara</td>
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<tr>
<td></td>
<td>898 HHs in Maridi</td>
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<tr>
<td>7</td>
<td>Mass Awareness through schools, markets, Church/Mosque</td>
<td>19 schools and 2556 peoples reached in Yei maridi and Nimule</td>
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<td>35 Water point awareness sessions in Yei</td>
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<td></td>
<td>1280 church/mosques announcements in Yei, Yambio, Maridi, Nzara</td>
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<tr>
<td></td>
<td>Activity</td>
<td>Progress/Achievements</td>
</tr>
<tr>
<td>8</td>
<td>Translation, design and printing of IEC materials</td>
<td>Over 70,000 different IEC materials printed</td>
</tr>
<tr>
<td>9</td>
<td>Mapping of partners and reporting</td>
<td>Mapping almost remaining SSRC and AAHI inputs</td>
</tr>
<tr>
<td>10</td>
<td>Formative Research (KAP)</td>
<td>Partner identified and questionnaires under review</td>
</tr>
<tr>
<td>11</td>
<td>Rumor Tracking and Management</td>
<td>Internews/UNICEF to support in incorporating rumor management in all the trainings Develop rumor tracking tool and perceptions</td>
</tr>
<tr>
<td>12</td>
<td>Hot-line and Bulk-sms</td>
<td>Hot-line active Letter with key messages at NCA for approval Hot-line unable to call back missed calls</td>
</tr>
</tbody>
</table>
Thank you