Top 20 INGO & NNGO responses to key questions on their COVID-19 program and organisation changes/adjustments

Thanks to: SP, ACROSS, GBI, SSGID, SPEDP, SAADO, CTP, WV, CH

**General**: Global trend toward caring and compassion: people challenged to think about their neighbor and how each individual’s actions impacts others; learning the art of social distancing, we are simultaneously more connected than ever!!

**What adjustments and changes you have made internal (organization) and external (operations) in past weeks due to COVID-19?**

**Internal**: working at home and online for the senior staff; video and voice conferences at least twice a day to ensure shared health concerns and alerts & organizational programs; Establish functional communication with the relevant Ministry of Health offices for regular updates; Staff are advised to comply with guidelines by MOH and WHO: private vehicles up to 4 people spaced at distance; handwashing and sanitizing facilities at our offices; Leadership adapted new means of team communication: staff also learning new technologies to continue working with groups and partners via online meetings. Most staff working from home while the essential staff, the finance team and few program staff not exceeding 10 people are working in office but maintaining social distancing. Installed a hand washing facility.

Internally, we have put in place alternate day shifts for key staff (Programs, Finance, Operations & CD) to be in the office in Juba while the non-essential staff are mostly working from home unless called upon to come to the office; we also issued the PPE (masks, sanitizers etc.) both in our field locations and office—we are thankful that our partners have asked us to reallocate 5% of our existing budgets to the COVID-19 efforts; urgently, our staff are also doing registration of cohort C beneficiaries in the BRACE II project in Aweil North which is taking longer than usual keeping in line with the governments directive on social distancing and personal hygiene rules.

Staff with internet facilities and who are comfortable taking their laptops home have started WFH freeing up space at the office to effectively enforce social distancing of at least 2m in the office; put up hand washing facilities at the office entrance and it is a requirement for everyone to wash hands every time they enter or exit the office; discouraged face to face meetings as much as possible and only do these when virtual meetings are not possible; no hand shake policy at the office; put in place is the appointment of **COVID-19 Focal Points** in each of our offices and distribution points; Focal Points are to make sure protocols of COVID-19 stay safe are observe everywhere and all times.

Activated our COVID-19 contingency plan: requested our staff to work from home and facilitated for this through provision of IT infrastructure support to enable virtual working; purchase of data modems and extra data bundles for staff; our IT has managed to connect staff to the organisations intranet to enable access to shared IT resources; we have done a lot of awareness training of our staff and disseminated information on COVID19 from authentic sources.
Reducing the number of meeting/training attendant less than 30, setting arrangement of participant with 1 m social distance; arranging hand washing materials for all training like sanitizer, soap, water etc. always starting with Covid-19 awareness; use of Posters/ IEC materials on Covid-19. At Juba level, our essential staff work on shift system and some only come when required/ necessary; working mostly from home.

External: limit staff movement from/ to field unless absolutely necessary (limit spread of virus); institutional hand washing; wipe down desk tops & door handles; staff on standby for lock down. Continues to deliver essential services like healthcare, ambulance transport, nutrition, and emergency distribution of food and supplies. Externally, the supply chain is moving slower than normal with most suppliers not able to risk getting materials to the field locations and the bank working half day is also frustrating operations.

Integration of COVID-19 response; hand washing facilities, water and hard/liquid soap in our country office and all Field Offices; sanitizers around the hand washing facilities; small size sanitizers for personal use of the staff; ethanol sprayers cleaning office furniture, stayers, toilets, etc. Staff to avoid congested places e.g. public transport, markets, bars, restaurants, etc.; Support some selected public places with hand washing facilities e.g. Kajokeji, 12 public locations supplied with hand washing facilities and soap and 2 in Nimule; not more than 20 persons will be allowed for training/distribution/meeting sessions and distances of about 2 meters sitting arrangement can be kept; create awareness among the public/beneficiaries; communicate with partners for guidance on how we should proceed;

At the operations level we have sourced some internal funding to do COVID 19 awareness campaigns in our areas of operations through volunteers we are training through health cluster partners; limiting community meetings and only doing them when it is really necessary and with not more than 25 people per meeting; observing social distancing, putting up hand washing facilities and avoiding social contact during meetings; orientation/ awareness of all staff on COVID 19 and ensuring every staff member completes the WHO online awareness training.

We are working with our implementing partners to identify project activities which can continue with adequate precautionary measures against COVID-19; planning to introduce awareness raising in all our current project beneficiaries through adaptation of our programs to incorporate COVID-19; just plans which we are seeking approval from our donors.

In our field locations, we have scaled down activities as we look for ways to formulate advocacy and prevention/ response messages around social distancing, hand wash etc.

WASH: sharing COVID 19 messages with staff for further cascading to communities. Handwashing points with soap for 20 seconds; social distancing; information sheets in local languages on symptoms and modes of transmission posted at key locations in the communities to read and share the message; Communities responding positively to behavior change recommendations; reduce the numbers of community members gathering at each water point, training centers and NFI distribution points to reduce exposure.
Food Assistance - General Food Distribution (GFD): dividing the food sharing areas into squares. Each square consists of two groups only. The idea is to reduce a multitude of beneficiaries accessing the place and hence minimize crowding; Staff provided with gloves, face masks and sanitizers in the scanning area and beneficiaries encouraged to stand a distance of one meter from the staff scanning ration cards; Hand washing materials with soap provided, at the Food sharing area, ration cards scanning area and the waiting area. All beneficiaries MUST wash their hands before accessing the food distribution area. Demarcation of the lining area with ash before the beneficiary verification/scanning and before receiving food. This is meant to minimize crowding during food distribution. Demarcation of the waiting area one meter away from each other to minimize the risk. Staff encouraged to avoid handshakes and practice social distancing. Washing hands regularly and avoid touching their faces to minimize the risks associated with COVID-19; beneficiaries were sensitized to practice social distancing at all times; beneficiaries encouraged not to spit or blow their noses in crowded areas; In coordination with WFP, SP plans to distribute 2 months of food rations to beneficiaries to reduce interaction and crowding.

Food Security and Livelihoods (FSL): proposed and ongoing activities doing/ will do to mitigate the effects of COVID 19 on our field operations; staff safety capacity building – training and awareness using materials and guidelines from UNICEF; strengthening health & hygiene community messaging / awareness to all the project beneficiaries (1500 HHs) daily by the field staff through: (1) distribution of 100 Pamphlets/posters and 1500 fliers to be done on house to house basis and during farmers’ training. These items will be provided by the lead agency in South Sudan-UNICEF; (2) Training of trainers (Training Lead farmers to train other farmers/beneficiaries. Beneficiaries’ training will continue with emphasis on-farm demonstrations to avoid crowding. The number of beneficiaries per practical session will be reduced to 4 plus the facilitator. Training forums will provide avenues for community education about COVID 19; use of sanitizers, liquid soap and clean water for hand washing during any training sessions and avoiding handshaking during greetings; Staff carry them to the field. Items to be procured using the OFDA budget, savings from M&E line and Causal laborers; minimizing number of training participants to 10 people and practicing the required distance during any training session; social distancing, no greetings while maintaining the 2-meter distance will be emphasized.

Any operational constraints/ consequences?
No major challenges; few stubborn beneficiaries who did not want to adhere to the guidelines; sent back to start the process afresh!
Borders and restricted movement and gatherings: hardship to staff whose family live in neighboring countries; rescheduled partner visits, and programme activities such as workshops, schools, and trainings.

Impact on project funding, won’t be known for time; Security forces deployed restricting movement; public places like banks are congested and government is partly shutdown; almost, nothing seems to be moving; restriction by the local by National Security in Magwi & Aweil they do not allow staff to meet beneficiaries; closure of some projects especially Education Projects; extra cost purchasing supplies; mostly delays in procurement and supply of essential materials to the field locations; price changes which are abnormal e.g. we were transporting seeds and tools from Terekeka to Gomeiza by boat and the price changed from 50,000ssp to 160,000ssp within a week!! Movement restrictions especially of staff
in the field; limitation in community mobilization and number of people who can participate in field activities; increased cost by purchase of hygiene materials like hand washing basins/ buckets and soap.

Weak internet connections in staff residential areas and unreliable power supplies; budget adjustments to incorporate COVID-19 programming requires donor approvals which we may not guarantee will be granted; may need additional resources to do more in our current projects such as awareness raising, distribution of soap, IEC materials etc.

The field staffs number reduced by 50% so as to reduce congested working environment, lower the field operation; low transport to access field;

We have suspended any further travel to the field locations; in fact today we have received message from one of our field location (Ganyiel) in Panyijiar that they would request partners to maintain the current staffing level instead of booking in more staff from Juba; for those who have traveled back to the field recently are required to self-quarantine in their compound/ residents for the next 14 days.

Any changes you foresee putting in place if/ when COVID-19 transmission picks up/ takes off in South Sudan?
High risk of infection in the communities where we operate, contemplating the following: continue live-saving programs only (GFD, TSFP BSFP, medical mission); put on hold activities that may pose a risk to our staff and beneficiaries (all training would have to be postponed and likewise field monitoring); encourage staff to work at home for those who can while only essential staff will remain engaged.
If total lock down, the staff will continue to work from home while maintaining contact with the respective clusters that we report to. Field offices will be operated by one or two staff.

Set adjusted targets; probably keep everyone in Juba working from home and engage in aggressive community awareness in the rural areas. This will need a lot of work from our side; suspension of field operations by government;

Covid-19 response plan prepared and task force formed; different scenario planning done considering, best and worst scenario and that communicated with donors. We would like to introduce hand washing, enforcement of social distancing in all our activities and those that require groups, to be suspended.

Key advocacy point. Cost related to some of COVID-19 measures are not budgeted or factored into on-going projects, therefore need for additional resources for mitigation measures or within the on-going project activities.