

MISSION REPORT TO SOUTH SUDAN CONDUCTED FROM 22nd -25TH SEPTEMBER 2009 IN JUBA



Compiled by:

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EARN coordinator

Circulation: EARN Coordination Committee

Executive summary

The objective of the mission was to;

1. Meet with the MOH senior management and NMCP staff
2. Catch up with the achievements registered to date
3. Touch base with the RBM in country partnership
4. Follow up with the Country Road Map development progress

Timing

The mission in country was from 22nd to 25th September 2009

Team composition

Peter Mbabazi- EARN Coordinator

People met

Mr. Yak Majok -Under secretary of the ministry of health, Dr Baba Samson-Director health services and Chairman CCM, Dr Othwonth Thabo- Programme manager NMCP, Dr Robert Azairwe- Chief of party MSH, Mr. Steve- Country Rep Malaria Consortium, Ms. Antonio- Advisor to principal investigator malaria consortium, Ms.Jane-Officer PSI, Ms. Mercie –Chief of party-PSI and PR GF Rd 7, Dr. Betty NMCP, Juliana –PSI, Mr. Mabasa –Malaria Consortium, Mr. George Conway-Deputy Head of office UNDP and PR GF Rd2, Mr. Constantino Doggle-NMCP, Mr. Bakhat Sebit- NMCP

Major issues

- **MIS Financial Gap**

There is a planned MIS for November 2009 however there is a financial Gap of \$0.3 million

- **UNITAID Nets Operational funds Gap**

UNITAID have delivered through UNICEF 1.6 million nets however there is a financial gap of \$3.2million for distribution

- **Progress by the programme**

The programme has made some progress and is expecting the delivery of 5.5 million LLIN and 3.1 m ACTs have been delivered and 2.4 million RDTs are expected.

- **Challenges**

HR capacity, limited formal health services serving 25% of the population, reporting from the states is very poor, Coordination of partners at different levels still a challenge and Acts not guaranteed after December 2009 and there is a gap of 1 million RDTs in case Round 9 does not get through.

- **Road map**

There is a draft Road map that needs full partnership participation and this will be achieved in the next 2 weeks.

Action points

- The UNTAID net distribution plan and budget to be made in the next 3 weeks for mobilising resources.
- It was agreed that the partners will convene and finalise the road map in the next two weeks.
- The lead agency contracting to be decided upon by the senior management in the weeks time
- To request to EARN for TA support as and when need arises
- Monthly updates from the programme on the progress

MEETINGS

1. Meeting with the Under Secretary Ministry of health

In attendance: Mr. Yak Majok the under secretary of the ministry of health, Dr Othwonth Thabo Programme manager NMCP and Peter Mbabazi EARN.

Discussed

- RBM partnership and the membership of South Sudan to EARN and the support given to south Sudan and readiness to support with TA at short notice.
- MIS planning is on going with support from GF and other partners, however still have gaps in funding, it is scheduled for November and
- Road map, the need to complete the road map that will be monitored to achieve the 2010 targets especially for LLINs and ACTs
- Gaps
 - UNITAID gap of 3.2 m for distribution
 - It was suggested that a discussion with the PR to raise funds for the Gap in the existing rounds. As well as exploring possibilities of GOSS.

2. Meeting with the Chairman of CCM

In attendance: Dr Samson Paul Baba the director of health services and chairman of the CCM, Dr Othwonth Thabo Programme manager NMCP and Peter Mbabazi EARN.

Discussed

- Global Fund
 - There is a robust CCM in place working and monitoring GF funds.
 - Round 2 that has been extended to March 2010 and round 7 that has just started, applied for Round 9
- South Sudan has had 3 years of self governance and faces lack human resource. They have been distributing Nets and now want to see the impact
- MIS is necessary for the baseline information, however needs TA for conducting MIS and financial Gap of \$300,000 -\$500,000

3. Meeting with the MIS working group

Back ground

There was a request from the ministry letter dated 28.07.09 (attached) to support the MIS Gap of \$1,614,322. EARN coordinator referred this to the MERG and email exchanges ensued that advised the programme to reduce the budget. The budget was further reduced in the letter dated 21.08.09(attached) to support a gap of \$576,046 and further dialogue ensued with the MERG and lastly the programme reduced the budget in the letter dated 3.09.09 (attached) amounting to a gap of \$310,319.

This meeting was one of the routine meetings held by the MIS technical working group and this time represented were: Centre for statistics, Malaria consortium, PSI, NMCP, MSH and EARN (see cover photo for members present)

Discussed

- The sample questionnaire and the field experience where there was a family of 60 people that was visited. The definition of house hold was discussed.
- Malaria consortium as a lead agency had recruited a staff to support the principal investigator. However, there were issues of administration costs that was raising the budget deficit by \$0.5m more. This was an issue that raised concern among the partners that had been participating in the formulation and preparations. It was purported that Malaria consortium coming as a lead agency was not done transparently and some partners were threatening to withdraw their financial support, making the bad situation even worse.
- The issue not taking blood samples from the pregnant women was fronted by the lead agency and the meeting rejected it on the basis that there is a lot of information that will be missed.
- The issue of using different people for listing was fronted by the lead agency, it was rejected on the basis that the survey field staff and supervisors need to familiarise themselves with the areas before the survey.
- There was issue of reduction of the sample size from 3600 to 3000 was an issue that was fronted by the lead agency due to budgetary considerations.

4. Meeting with the South Sudan Partnership

Members are: WHO, UNDP, Malaria consortium, PSI, INGO, NMCP,MSH UNDP and EARN

Discussed

NMCP progress

The progress made to date that was presented by the programme manager, (see attached) key to note was that

- There is epidemic preparedness mechanism that is planning for El Nino

LLIN

- USAID provided 90,000 LLIN
- GF round 7 3 million LLIN
- UNITAID 1.6 million LLLIN

ACTS

- Had shortage of ACTs in the 1st half of the year. However expects the following fro 2009/10
- MSH/Deliver: 1.6million doses
- MOH: 250,000 doses
- GF Round 2: 650,000 doses
- GF round 7: 630,000 doses
- ECHO: 188,000 doses

RDTs

- Need of 1,696,360 RDTs
- MOH to provide 632,100
- Gap: 1,064,260 (GF Round 9)

Key Challenges

- HR capacity (NMCP staff has been 2 and is now receiving 3 more)
- States need 1 each and 3 states have no Malaria coordinator
- Limited formal health services serving 25% of the population
- Reporting from the states is very poor
- Coordination of partners at different levels still a challenge
- Acts not guaranteed after December 2009

UNITAID NETS

- It was reported that 1.6m nets have stated arriving in the country from various borders and the only challenge is the \$3.2 m needed for distribution. It was agreed that a net distribution plan and budget should be made as a tool for mobilising resources.

EARN UPDATES

The EARN updates presentation was made by the EARN coordinator (see attached) Discussed the issues around the Road map and the need to develop one

- Reactions were how much was EARN contributing towards the MIS gap as well as the UNITIAD nets distribution gap
- it was responded that EARN does not contribute funds for country implementation and it that it only Supports Technical Assistance for mobilisation of the resources among others
- It was observed that EARN should only promise where it can support

5. Meeting with the South Sudan Principal Recipients

In attendance was: Ms.Mercie-PSI: PR for GF round 7, Mr. George Conway- UNDP:PR GF Round 2, Mr Erasmus –UNDP HIV and TB, Dr Othwonth Thabo : NMCP and Mr. Peter Mbabazi: EARN

Discussed

The possibilities of funding the MIS gap as well as the UNITAID gap

Round 7

- The funding for MIS is under this grant to the tune of about \$750,000 and this is still a phase 1 and 1st tranche so may not be able to move around the budget as even savings may not be raised.

Round 2

- Since round 2 has been extended from September to March 2010 and most budgets have been revised and can on the maximum raise \$100,000,
- Difficulties of transfer of funds may not arise as both PSI and Malaria Consortium are sub recipients of the GF round 2.
- Other ways of support can be in the procurement of certain commodities by UNDP

EARN

- EARN offered to support the technical assistance in form of a consultant to support the process if that is deemed necessary but not paying the lead agency fees.

Contracting the Lead agency

- It was observed that PSI is able and at no extra cost to manage the finances for the MIS, it only lacks the technical capacity to lead the MIS.

- It was observed that the way Malaria consortium came to be a lead agency was not transparent and may cause some difficulty given that partners are threatening to withdraw their support.
- This issue will be tabled to the senior management meeting in a week's time to pave the way forward.

6. Action points

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- To request to EARN for TA support as and when need arises
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