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## Disaster relief emergency fund (DREF) South Sudan: Polio Outbreak

 International Federation  
of Red Cross and Red Crescent Societies

**DREF operation n° MDRSS002**  
**GLIDE n° EP-2013-000137-SSD**  
**25 October 2013**

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent emergency response. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

**CHF 168,065 has been allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support the South Sudan Red Cross Society in delivering immediate assistance to 525,749 beneficiaries. Unearmarked funds to repay DREF are encouraged.**

**Summary:** Three cases of wild poliovirus type 1 (WPV1) have been confirmed in South Sudan up to the week beginning 14 October 2013. Prior to the current outbreak, South Sudan had been wild poliovirus-free since June 2009. The immediate priority is to stop this active outbreak in South Sudan through emergency Polio immunisation. The first two rounds of Polio immunisations are planned for 5 and 15 November, followed by another round in December 2013.

South Sudan Red Cross Society (SSRC), with support from IFRC's DREF, aims to assist the first two national rounds of emergency Polio immunisation in 24 counties in 3 states (West, Central and East Equatoria) of South Sudan through social mobilisation activities. The States of West, Central and East Equatoria are the focus on the current outbreak in South Sudan and are high risk areas that border Kenya and Ethiopia (where other WPV1 cases have been reported). This DREF funding will support immediate participation and action of SSRC in the forthcoming immunisation rounds that will contribute to the urgent response to control the outbreak.

This operation is expected to be implemented over three months, and will therefore be completed by 25 January 2014; a Final Report will be made available three months after the end of the operation, by 25 April 2014.

[<click here for the DREF budget; here for contact details; here for a map of the affected area>](#)

## The situation

Polio (poliomyelitis) is a highly infectious and potentially fatal disease caused by a virus that is spread by faecal-oral transmission from person to person. Most people infected with the poliovirus have no signs of illness and are never aware they have been infected. These symptomless carriers can "silently" spread the infection to thousands of others before the first case of polio paralysis emerges. One in 200 infections leads to irreversible acute flaccid paralysis (AFP) in a matter of hours, usually in the legs, caused when the virus invades the central nervous system.

Polio can infect any age group, but it mainly affects children under the age of five years. There is no cure, but there are safe and effective vaccines and the strategy to eradicate polio is based on preventing infection by immunising every child until transmission stops as well as rapid response through vaccination campaigns to control the outbreak. WHO considers a single confirmed case of polio paralysis to be evidence of an epidemic.

Three cases of wild poliovirus type 1 (WPV1) have been confirmed in Sudan up to reporting period week beginning 14 October 2013. Prior to the current outbreak, South Sudan had been wild poliovirus-free since June 2009 but is situated in the “wild poliovirus importation belt” – a band of countries stretching from west Africa to central Africa and the Horn of Africa which are vulnerable to re-infection with imported poliovirus.

The outbreak in South Sudan should be considered in the context of the ongoing outbreak of Polio in the Horn of Africa region. WPV1 was first confirmed in the Benadir region of Somalia and has continued to spread rapidly. Six new WPV1 cases were reported in the past week beginning 14 October 2013 (four from Somalia and two from Ethiopia). The total number of WPV cases (all WPV1) for 2013 in the Horn of Africa is now 197 (174 from Somalia, 14 from Kenya, six from Ethiopia and three from South Sudan). This Polio outbreak is likely to be prolonged and to spread quickly, requiring urgent co-ordinated action by Horn of Africa member states and between national and international partners.

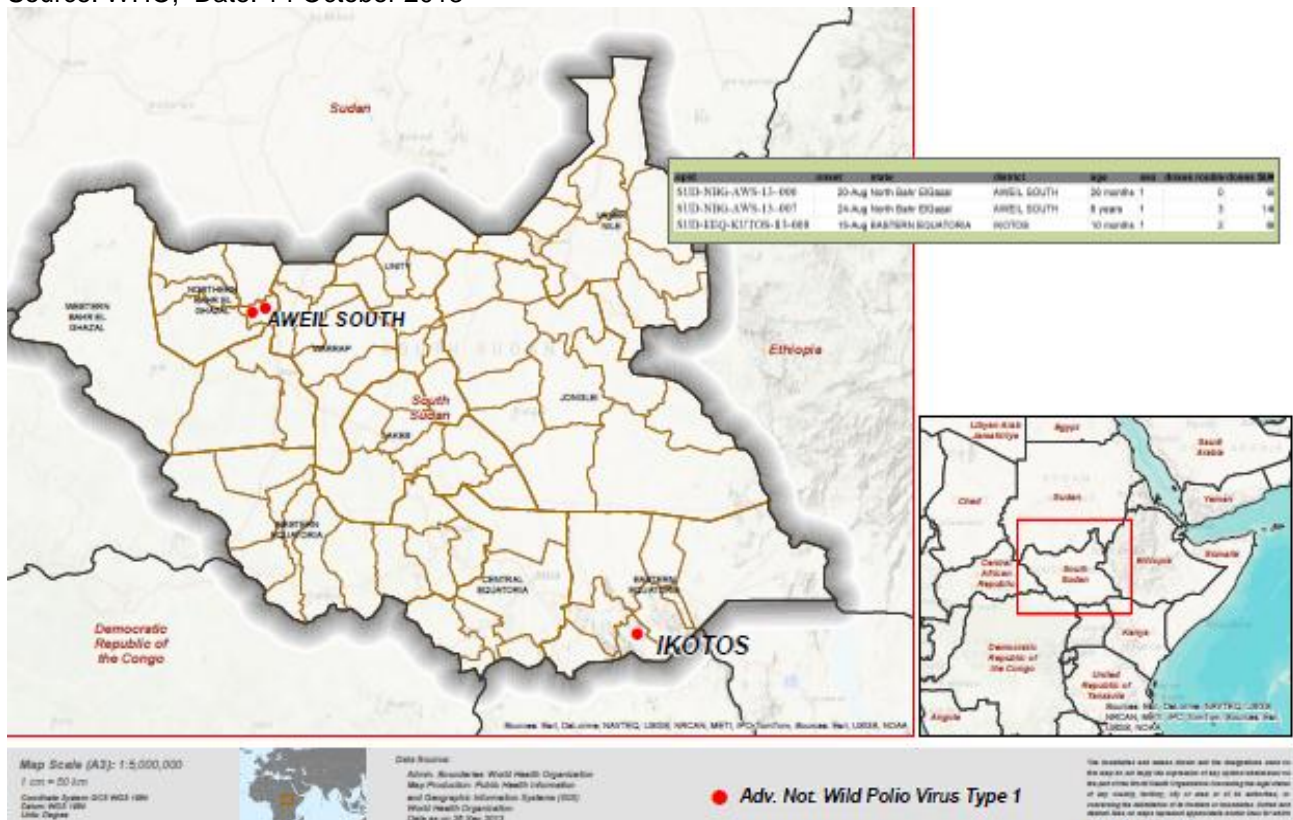
Of great concern is the low vaccination coverage in South Sudan, which is the major reason why the current outbreak has spread from neighbouring countries, and a large part of the population remains at great risk for the infection.

A total of 34 million children under five will be reached through multiple rounds of Polio immunisation over the next six months across the Horn of Africa with an estimated 1.8 million children under five targeted in South Sudan. 525,749 children under five in 24 Counties in 3 States (West, Central and East Equatoria) of South Sudan will be targeted through this DREF Appeal to support national immunisation rounds.

The immediate priority is to stop this active outbreak in South Sudan. National rounds of emergency Polio immunisation are planned in South Sudan in November and December 2013. The first round of immunisation is planned by Ministry of Health to take place during the week beginning 4 November 2013. South Sudan Ministry of Health have requested logistics support and independent monitoring of vaccination activities from SSRC during round 1 of immunisation activities (week beginning 4 November 2013) to ensure vaccination coverage of children under five in target areas. SSRC has been requested by the Ministry of Health to support in the emergency response to this outbreak, as well as with longer term actions to prevent further outbreaks.

**Figure 1. Location of WPV1 cases in South Sudan**

Source: WHO; Date: 14 October 2013



## Coordination and partnerships

The South Sudan Ministry of Health is coordinating the national response to the situation, and has scheduled the first round of emergency immunisation to take place during the week beginning 4 November 2013. South Sudan Red Cross is a member of the national Polio Task Force and a key partner of Ministry of Health in Polio planning and response.

The Global Polio Eradication Initiative (GPEI) is co-ordinating international and national partners, including World Health Organization (WHO), UN Children's Fund (UNICEF), Bill and Melinda Gates Foundation (BMGF), Rotary and Centres for Disease Control (CDC) to support Horn of Africa member states in their Polio outbreak response activities. WHO has the mandate to provide technical support to member states and oversee surveillance of Polio outbreaks. UNICEF has a mandate to provide supply chain of vaccine stocks and communications for polio vaccination campaigns. CDC and BMGF provide technical support to member states in vaccination activities. World Vision is involved in immunization activities on local level. SSRC has been requested to assist with the social mobilization, community mapping and educational activities for the immunization.

IFRC Regional Office for Eastern Africa and Indian Ocean Islands (EAIOI) will provide technical support and guidance in the planning and implementation of the DREF operation and other longer term Red Cross polio response and prevention activities. The IFRC EAIOI office will also continue provide support to coordinate the response on a regional level. A similar DREF operation is undertaken in Ethiopia at the same time, and these operations will fall under the same regional coordination mechanisms.

IFRC, ICRC and partner national societies (PNSs) in-country with health interests participate in the health technical committee meetings that are convened by SSRC's health department every month. All health issues are tabled there and actions (bilateral and multilateral) are discussed. In terms of the polio response, all partners in-country continue to be briefed on the evolving situation and planned response. To date, there is no specific contribution put forward by any other partner but information continues to be shared regularly.

The Red Cross Red Crescent Movement will work closely with actors and agencies in South Sudan, including the South Sudan Ministry of Health, CDC, UNICEF, WHO, BMGF and Rotary to ensure activities are aligned and complement the national Polio plan of action. This DREF funding will support immediate participation and action of SSRC in the forthcoming immunisation rounds and provide a foundation for future partnership with other agencies (including WHO/UNICEF) and activities in support of the Ministry of Health national plan for further rounds of vaccination.

## Red Cross and Red Crescent action

As being member of the national Polio Task Force (led by the Ministry of Health) and health working groups, SSRC has been involved in the planning for the Polio response. The government has requested SSRC to support with social mobilization for vaccination and monitoring of the vaccination coverage in high risk and inaccessible areas, which will be possible through this DREF operation. SSRC is currently discussing with the government and the global partners, potential involvement in longer term activities to prevent further outbreaks.

IFRC Regional Office for Eastern Africa and Indian Ocean Islands (EAIOI) convened a regional Polio planning meeting of eight countries – including South Sudan – in Nairobi on 17-18 October 2013. National Societies, Ministries of Health and partners including WHO, UNICEF, ICRC, CDC and BMGF attended and country-level working groups were established to determine needs and how best National Societies could engage and support national Polio planning and response, including urgent action to control the active outbreak. During the meeting, South Sudan was requested to assist the ministry of health with social mobilization activities in the country, focusing on the most high risk and inaccessible areas of West, Central and East Equatoria.

Through this DREF operation, IFRC will provide technical and financial support to SSRC to enable the social mobilization for vaccination and support the government emergency response to the outbreak. In particular, the regional health delegate will provide extensive technical support in country for planning the intervention, training, and overseeing the micro planning and mapping exercise, as well as supporting the implementation of the operation. IFRC will monitor and evaluate the operation, as well as report on the DREF operation.

Although Polio is also related to water and sanitation, this DREF operation will focus on supporting the urgent and immediate immunization activities. Needs related to water and sanitation will be raised by the Red Cross in the Polio task force and health working groups as an area in need of intervention.

### The needs

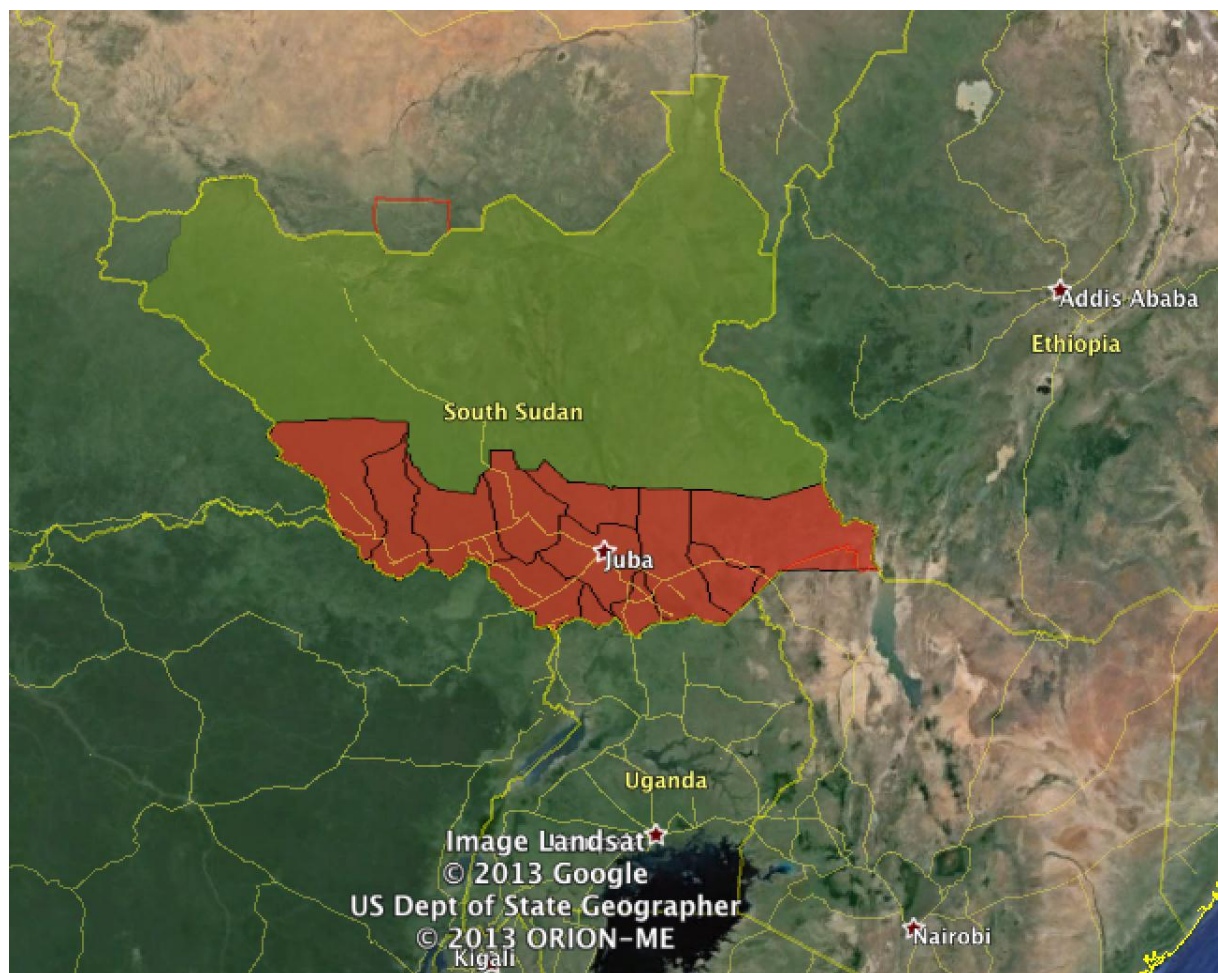
National emergency rounds of Polio immunisation are planned in 24 counties and 3 states (West, Central and East Equatoria) of South Sudan following three confirmed cases of WPV1 in the country. 1,8 million children under five remains at high risk in South Sudan for the infection. This response will require urgent and concerted action on behalf of member states, national and international partners to support subnational and national immunisation campaigns.

**Beneficiary selection:** 525,749 children under five in 24 Counties in 3 States (West, Central and East Equatoria) of South Sudan will be targeted through this DREF operation. The States of West, Central and East Equatoria are the focus on the current outbreak in South Sudan (Figure 1), and are high risk areas that border Kenya and Ethiopia (where other WPV1 cases have been reported) (Figure 2).

**Immediate needs:** Low vaccination coverage is the primary reason why this current Polio outbreak has started in South Sudan, and accurate micro-planning, mapping and surveillance of coverage is essential to ensure all children under five are vaccination and adequate immunity is reached. The population will need appropriate information and education to encourage immunization of their children.

**Figure 2. 24 target Counties (highlighted in Red) of 3 States (West, Central and East Equatoria) in South Sudan (highlighted in Green)**

Source: Google Earth



**Table 1. Estimated population, children under five (U5) Households (HH), Red Cross Volunteers (Vols), Teams and Supervisor (Sups) requirements**

Population Source: Southern Sudan Centre for Census, Statistics and Evaluation, 2008 (the latest census undertaken)

State	County	Population	U5	HH	Vols	Teams	Sups
Central Equatoria	Juba	368,436	73,687	43,345	144	72	7
Central Equatoria	Kajo Keji	196,387	39,277	23,104	77	39	4
Central Equatoria	Lainya	89,315	17,863	10,508	35	18	2
Central Equatoria	Morobo	103,603	20,721	12,189	41	20	2
Central Equatoria	Terekeka	144,373	28,875	16,985	57	28	3
Central Equatoria	Yei	201,443	40,289	23,699	79	39	4
Eastern Equatoria	Budi	99,234	19,847	11,675	39	19	2
Eastern Equatoria	Ikotos	84,649	16,930	9,959	33	17	2
Eastern Equatoria	Kapoeta East	163,997	32,799	19,294	64	32	3
Eastern Equatoria	Kapoeta North	103,084	20,617	12,128	40	20	2
Eastern Equatoria	Kapoeta South	79,470	15,894	9,349	31	16	2
Eastern Equatoria	Lopa	106,161	21,232	12,490	42	21	2
Eastern Equatoria	Magwi	169,826	33,965	19,980	67	33	3
Eastern Equatoria	Torit	99,740	19,948	11,734	39	20	2
Western Equatoria	Ezo	80,861	16,172	9,513	32	16	2
Western Equatoria	Ibba	41,869	8,374	4,926	16	8	1
Western Equatoria	Maridi	82,461	16,492	9,701	32	16	2
Western Equatoria	Mundri East	48,318	9,664	5,684	19	9	1
Western Equatoria	Mundri West	33,975	6,795	3,997	13	7	1
Western Equatoria	Mvolo	48,134	9,627	5,663	19	9	1
Western Equatoria	Nagero	10,077	2,015	1,186	4	2	0
Western Equatoria	Nzara	65,712	13,142	7,731	26	13	1
Western Equatoria	Tambura	55,365	11,073	6,514	22	11	1
Western Equatoria	Yambio	152,257	30,451	17,913	60	30	3
<b>Total</b>		<b>2,628,747</b>	<b>525,749</b>	<b>309,264</b>	<b>1,031</b>	<b>515</b>	<b>52</b>

## The proposed operation

This DREF operation will support SSRC to participate in two rounds of emergency Polio immunisation and to conduct micro-planning and mapping, community education and social mobilisation, and surveillance in support of Polio immunisation activities in 24 Counties in 3 States (West, Central and East Equatoria) of South Sudan.

Accurate micro-planning that uses household census data to estimate target population number and distribution is required in all target districts to support activities and resource allocation. Household and village level education and social mobilisation will be conducted by South Sudan Red Cross Society community volunteers prior to Polio immunisation rounds taking place to create demand and ensure high immunisation coverage during Round 2 of immunisation. A post-campaign coverage survey will be conducted in all target Counties to measure coverage of education and immunisation activities during Round 2 of immunisation.

During the first round of immunisation, which will take place in week beginning 4 November 2013, SSRC will support Ministry of Health vaccination teams with logistics support and independent monitoring of vaccination coverage of children under five. The logistic support will include making available vehicles for the vaccination teams and transporting vaccination stock. Transportation will also be provided for supervisors for independent monitoring purposes as requested by the government. 5 days is planned for the supervisors to verifying the vaccination coverage among the targeted population.

During the second round of immunisation, which will take place during week beginning 18 November 2013, South Sudan Red Cross will conduct micro-planning and mapping, community education and social mobilisation, and surveillance in support of Ministry of Health Polio immunisation activities. Accurate micro-planning of target households and population, mapping of villages and population groups not included in

census data, and surveillance of coverage is essential to ensure all children under five are vaccinated and adequate immunity is reached.

24 Counties in 3 States (West, Central and East Equatoria) will be targeted (Figure 1). These counties are the focus on the current outbreak in South Sudan (Figure 1), and are high risk areas that border Kenya and Ethiopia (where other WPV1 cases have been reported) (Figure 2). 1,031 volunteers and 52 supervisors will be mobilised for the activities (Table 1).

Mobile phone technologies will be used to support and enhance the programming of these activities. 52 Android phones will be purchased (20 with the DREF funds and the rest through other funding sources) and modified (as well as locked so that only the survey application can be used on the phone and it cannot be used for any other purpose).

The supervisor will be trained during a two-day training in the use of the android phone for mapping, supervision and surveys. The IFRC Regional Health Delegate will facilitate the trainings and oversee implementation of the mobile phone tools during the operation. The trained supervisors will each train around 20 volunteers in the technology and methodology for undertaking the social mobilization and mapping campaign.

During household and village education visits, volunteer teams will identify and map any villages not included in the micro-planning to identify gaps and inform vaccination campaign activities. GPS co-ordinates and demographics of each missed settlement / village will be recorded and provided to Ministry of Health and partners for their own programming and planning of the immunisation campaign to ensure these areas are not missed.

Teams composed of two volunteers will be responsible for community education and social mobilisation covering 150 households per day. Four days of house-to-house and village-level education and social mobilisation activities are programmed to take place prior to the immunisation campaign itself.

A Polio awareness and social mobilization radio campaign will be undertaken in the three targeted states. SSRC and the Ministry of Health will prepare the key messages for the transmission that will be broadcasted in Arabic language.

Monitoring will take place while activities are on-going to identify gaps in implementation and ensure they are addressed in real time. A monitoring form will be programmed into the android phones, and GPS co-ordinates of each household will be recorded. All questions will have an English and local language translation and appropriate training in the use of mobile phones and mapping techniques will be provided during the two-day training at regional level.

## Emergency health and care

<b>Outcome: To reduce Polio morbidity and mortality and prevent Polio transmission among 525,749 children in 24 Counties in 3 States (West, Central and East Equatoria) of South Sudan</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<b>1. Round 1 immunisation has been undertaken in 3 States (West, Central and East Equatoria) of South Sudan with logistics support and monitoring of community coverage from ERCS.</b>	<p><i>1. Logistics support</i> Three branches provide logistics support to Ministry of Health Polio vaccination teams during Round 1 of vaccination.</p> <p><i>2. Independent monitoring</i> SSRC Supervisors will conduct independent monitoring of immunisation coverage of children under five during Round 1 of vaccination.</p>
<b>2. Micro-planning for delivery of household and community-based activities have been completed and verified for 24 Counties in 3 States (West, Central and East Equatoria) of South Sudan for preparation of Round 2 of immunisation.</b>	<p><i>1. National and State micro-planning</i> 1 national micro-planning and mapping training is completed for 3 States.</p> <p><i>2. County micro-planning</i> 24 County-level micro-plans are completed with Ministry of Health and partners. Accurate micro-planning of target households and population groups not included in census data (for example nomadic and cross-</p>

	<p>border populations), is essential to ensure all children under five are vaccinated and adequate immunity is reached.</p> <p><i>3. Village mapping and reporting</i> Mapping of villages omitted from desktop micro-planning exercises is completed by South Sudan Red Cross district teams using mobile phone based mapping and reporting tool (Magpi).</p>
<p><b>3. 525,749 households in 24 Counties in 3 States (West, Central and East Equatoria) received household or village level education and social mobilisation during Round 2 for Polio prevention.</b></p>	<p><i>1. Training of supervisors</i> Identify and train 52 South Sudan Red Cross Society supervisors (1 per 10 volunteer teams) in 24 Counties of West, Central and East Equatoria States.</p> <p><i>2. Training of volunteers</i> Identify and train 1,031 South Sudan Red Cross Society community volunteers (2 per team) in 24 Counties of West, Central and East Equatoria States.</p> <p><i>3. Household or village level education and Social mobilisation</i> Carry out four days of house-to-house and village-level education and social mobilisation activities prior to immunisation campaign activities (total of 2,062 volunteer days).</p> <p><i>4. Polio awareness and social mobilization radio campaign</i> Production of radio jingles and messages to be broadcasted in 3 states in South Sudan for increasing awareness and mobilization purposes. The key messages will be delivered in Arabic language. One radio jingle will be run 3 times per day for 10 days in the targeted 3 states.</p>
<p><b>4. Household-based cross sectional survey of education and Round 2 campaign coverage is completed, indicating level of community awareness and coverage of immunization campaign.</b></p>	<p><i>A1. Survey training</i> 52 teams (one supervisor and one volunteer per team) training in survey methodology.</p> <p><i>A2. Coverage survey</i> 52 teams visit two villages each day across all Counties and survey 20 households per village (over four days).</p>

### Logistics and transport

The mobile phones that will be used for the operation will be purchased in Nairobi by IFRC regional office, in line with the IFRC procurement guidelines.

SSRC will provide logistical support and transport to the Ministry of health during the first immunisation round, which will involve some transportation of government vaccination teams and vaccination stock. SSRC monitoring, social mobilisation and supervisor teams will also require substantial transportation support during the DREF operation during the first and second round.

### Communication and advocacy

IFRC region and zone office will support SSRC with communication and advocacy activities for the DREF operation. The purpose of the communication and advocacy activities will have 2 main objectives:

- to contribute to raise awareness on the polio outbreak in South Sudan and Horn of Africa and the need for a coherent and coordinated response to address and prevent the further spread of the infection.
- to raise awareness on the specific role and value added of RC volunteers in polio response (education, community sensitisation, fight against stigma, disease surveillance use of mobile technology, etc). Trained volunteers, who live in the same community as the local population and speak the same language, can help reach the most inaccessible, poor and marginalized communities.

This will be done through collecting human interest stories as well as case studies with key messages, lesson learnt and best practices. In addition to regularly providing communication and advocacy materials and updates within the movement, for the donors and the media, IFRC regional office will work closely and in coordination with the Regional Polio Advocacy Working group that IFRC is part of together with BMGF;

UNICEF, WHO, CDC and Rotary International. This will ensure that national issues will be raised and advocating for at regional and international level, including with GPEI network.

## Monitoring and evaluation

SSRC Disaster Management and Health staff will implement, supervise, monitor and evaluate the intervention, in close coordination and partnership with the Ministry of Health, and other partners.

A post campaign coverage survey will be undertaken that will enable valuable information for result analysis of the intervention in terms of awareness and coverage levels.

A lessons learned workshop will be organized to enable a review and reflection on the achievements made, challenges experienced during the intervention, and recommendations for future operations. The review of the use of methodology and utilization of mobile phone technology will be important for future operations.

The IFRC country and regional office, in particular the Regional Health Delegate, will technically support and monitor the DREF intervention. The IFRC region and zone will provide technical support for the review and evaluation exercise.

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## Contact information

### For further information specifically related to this operation please contact:

- **South Sudan Red Cross:** Arthur Poole, Secretary General; mobile phone: +211 912 146 506; email: [info@southsudanredcross.org](mailto:info@southsudanredcross.org)
- **IFRC Country Representation:** Paula Fitzgerald, Country Representative; mobile phone: +211 912 179 511; email: [paula.fitzgerald@ifrc.org](mailto:paula.fitzgerald@ifrc.org)
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- **IFRC Zone:** Daniel Bolaños Gonzalez, Disaster Management Coordinator; mobile phone: +254 731 067 489, email: [daniel.bolanos@ifrc.org](mailto:daniel.bolanos@ifrc.org)
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### For Resource Mobilization and Pledges:

- **In IFRC regional representation:** Diana Ongiti, Senior RM Officer; phone +254 20 2835 276; email: [diana.ongiti@ifrc.org](mailto:diana.ongiti@ifrc.org)

### For Performance and Accountability (planning, monitoring, evaluation and reporting enquiries)

- **In IFRC Zone:** Robert Ondrusek, PMER/QA; mobile phone: +254 731 067 277; email: [Robert.ondrusek@ifrc.org](mailto:Robert.ondrusek@ifrc.org)
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## How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

# DREF OPERATION

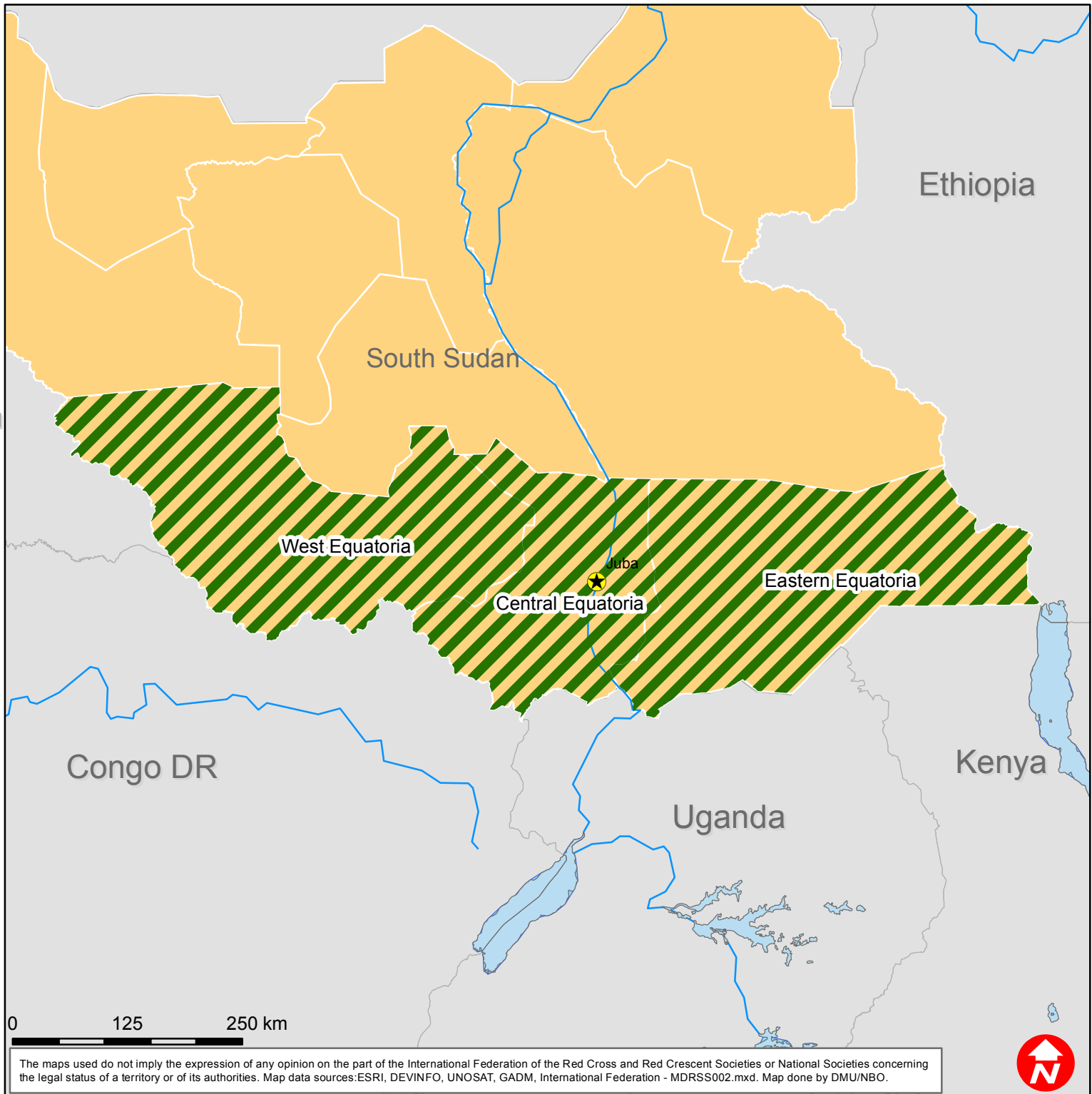
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South Sudan Polio (MDRSS002)

Budget Group	DREF Grant Budget CHF
Shelter - Relief	0
Shelter - Transitional	0
Construction - Housing	0
Construction - Facilities	0
Construction - Materials	0
Clothing & Textiles	0
Food	0
Seeds & Plants	0
Water, Sanitation & Hygiene	0
Medical & First Aid	0
Teaching Materials	7,833
Utensils & Tools	0
Other Supplies & Services	0
Cash Disbursements	0
<b>Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES</b>	<b>7,833</b>
Land & Buildings	0
Vehicles	0
Computer & Telecom Equipment	2,964
Office/Household Furniture & Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
<b>Total LAND, VEHICLES AND EQUIPMENT</b>	<b>2,964</b>
Storage, Warehousing	0
Distribution & Monitoring	0
Transport & Vehicle Costs	57,508
Logistics Services	0
<b>Total LOGISTICS, TRANSPORT AND STORAGE</b>	<b>57,508</b>
International Staff	0
National Staff	0
National Society Staff	9,234
Volunteers	36,725
<b>Total PERSONNEL</b>	<b>45,959</b>
Consultants	0
Professional Fees	0
<b>Total CONSULTANTS &amp; PROFESSIONAL FEES</b>	<b>0</b>
Workshops & Training	10,485
<b>Total WORKSHOP &amp; TRAINING</b>	<b>10,485</b>
Travel	27,964
Information & Public Relations	2,964
Office Costs	0
Communications	255
Financial Charges	494
Other General Expenses	1,383
Shared Office and Services Costs	0
<b>Total GENERAL EXPENDITURES</b>	<b>33,059</b>
Partner National Societies	0
Other Partners (NGOs, UN, other)	0
<b>Total TRANSFER TO PARTNERS</b>	<b>0</b>
Programme and Services Support Recovery	10,257
<b>Total INDIRECT COSTS</b>	<b>10,257</b>
<b>TOTAL BUDGET</b>	<b>168,065</b>



# South Sudan: Polio Outbreak



- Capital
- Target Areas
- SSD\_adm0