

Message from the Head of Mission and Force Commander

The emerging evidence based on COVID-19 is rapidly evolving and I am grateful that UNISFA has an Integrated Medical Team of Civilian and Military medical personnel working tirelessly to keep the Mission afloat on COVID-19 related issues.

So Far, there is no confirmed case in UNISFA. A suspected case of a contractor has been referred to MSF in Agok and 6 contacts have also been identified and quarantined.

I therefore wish to take this opportunity to thank the Mission Leadership Team (MLT) and the COVID-19 Task Force coordinated by Mr. Martin Peace for a job well done. Specifically, I wish to acknowledge the efforts of the Medical Team, that are indeed the first line of respondent as well as other frontline workers to fight COVID-19.

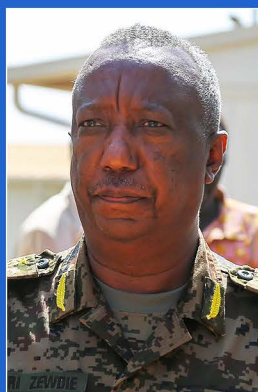
I recognise that fear and uncertainties of COVID-19 is likely to affect people's mental health, especially in terms of emotions and cognition. I therefore urge all of you to take the necessary precautions and seek help when needed. I encourage you all to practice measures to manage your stress and anxiety and make use of the Staff Counselling Unit if deemed necessary.

There could be some few administrative challenges, but each and every one of you has shown resilience and support during this very difficult moment, for which I thank you. I am confident that soon, the world will overcome this invisible enemy, and our lives will get back to normalcy.

Stay Safe.

“ I therefore urge all of you to take the necessary precautions and seek help when needed. ”

Major General
Mehari Zewdie
Gebremariam



Mission Leadership with the Medical Team

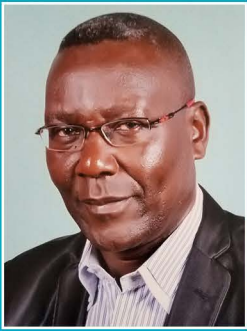
UNISFA C19 News Brief

Regular updates on the Mission's response to COVID19

SOME INFORMATION FROM THE UNISFA COVID-19 TASK FORCE

Notice: The flight scheduled for 4 June 2020 successfully took off with Staff who voluntarily decided to leave the mission. Staff members and UNVs were encouraged to utilize entitlement travel options such as home leave or family visit travel to cover the cost of commercial air tickets.

- So Far, there is no confirmed case in UNISFA. A suspected case of a contractor was referred to MSF Hospital in Agok on 27/05/2020, awaiting COVID-19 testing. Six contacts have been identified and quarantined.
- From the Abyei community, 4 confirmed case have been tested, treated and discharged from MSF Hospital in Agok May 2020. They are all from the Amiet common market.
- Samples of other suspected cases have been sent to Juba by MSF. These cases are from Areas like Juuljok, Awalnorn and Abyei town. Tests are yet to be confirmed.
- The MLT has agreed to maintain the status quo with regard to suspension of UNPOL and UNMO patrols.
- The TF and MLT have recommended that the wearing of face masks should continue within UNISFA and should be observed by all.
- The UNISFA contingency plan has been finalized and is available on the website.
- Arrangements are being made for Personnel in team site to obtain their weekly supplies from PX to avoid inconveniences due to the rationing required by the PX.
- Staff members are warned against spreading of rumors and unverified information. The TF calls for restraint and caution in this regard.



UNISFA MEDICAL TEAM RESPONSE TO COVID-19

A message from
the Chief of Medical Team

UNISFA Medical Team is the first line of respondent for fighting COVID-19 in the Mission. It comprises of an Integrated team of Civilian and Military Medical Personnel from both level 1 and level 2 Health Facilities. The team continues to work tirelessly 24/7 under the guidance and regulations laid down by the Mission according to its Contingency Plan. This contingency plan is based on COVID-19 UN Medical Director's Pandemic Guidelines. Accordingly, the Mission's COVID-19 Task Force has been established & is fully operational within UNISFA with full participation of the Medical Team.

FACTS ABOUT COVID-19

COVID-19 which stands for Corona Viral Disease-2019 & is caused by the SARS-CoV-2. WHO declared it as a Public Health Emergency of international concern on 30th January 2020 and labelled it as a Pandemic on 11th March 2020.

1 Transmission

is person-to-person which occurs mainly via respiratory droplets generated by coughing and sneezing, and through contact with contaminated surfaces i.e. droplets and contact transmission. Droplets typically do not travel more than 2 meters and do not linger in the air. The incubation period is known to be 2-14 days following exposure. Most cases develop signs & symptoms around the 5th day after exposure. Studies show that patients are not thought to be infectious until the onset of symptoms. The median time from symptom to the onset to clinical recovery is approximately 2 weeks for mild cases.

2 Symptoms

vary from mild to critical. The most common symptoms are fever, cough and shortness of breath. Some patients may have aches and pains, fatigue, nasal congestion, runny nose, sore throat or diarrhea though these are described much less commonly. Symptoms are non-specific and can mimic other respiratory illnesses such as those caused by the seasonal influenza and other respiratory viruses. Asymptomatic infections have also been described, but actual occurrence and impact are yet to be determined.

3 Treatment :

Only symptomatic treatment is provided as there is no specific antiviral treatment yet available. However, a comprehensive supportive therapy for the complications is recommended and can be provided if required which includes appropriate antibiotics, oxygen, intravenous fluids and mechanical ventilation through life-support equipment. All these supplies are in sufficient quantities in the Mission.

4 Prognosis :

About 80% of the infected individuals develop only mild symptoms and recover with or without basic symptomatic treatment. Approximately 15% develop moderate to severe symptoms who require hospitalization and treatment. 5% of these infections (mostly elderly people & those with underlying medical conditions) require critical care. The survival rate of these individuals is far less than the others.

The guidelines from World Health Organization & Medical Directorate in UNHQ necessitate certain measures to be in place regarding preparedness and response to the pandemic and the status of UNISFA is as hereunder.



Mission Leadership visit to level-1 clinic ensuring the Mission's capability with COVID-19 pandemic

GENERAL PREPAREDNESS

A lot of work has been put into acquiring adequate stock of medical supplies i.e. Personal Protective Equipment (gowns, gloves, face shields, masks, etc.), Medical equipment (ventilators, defibrillators, suction machines etc.) & necessary supportive drugs and other consumables.

RESPONSE MEASURES

A 3-Phase Response system is in place to manage and coordinate COVID-19 responses within UNISFA.

Phase 1: Primary prevention

1. At the very outset the Senior Management was apprised on the Pandemic including the speed of spread, its gravity and possible impact on the Mission.
2. As per the instructions from the Mission Administration, the Medical Section encouraged staff with underlying medical conditions to self-identify. With the support from Human Resource (HR), this exercise was implemented in order to facilitate their move and work from safer locations. Many of them have already left the mission to places with better equipped settings for critical medical care if required & arrangements have been made for them to work remotely.
3. Efforts are continuing for creation of awareness to all the UNISFA Personnel with emphasis on infection prevention mainly targeting on social distancing, cough etiquette and hand hygiene.
4. Continuous health education on COVID-19 & specific hands on trainings to all the Medical Staff as well as other front-line workers is ongoing.
5. Handwashingpoints, social distancing and wearing of masks have been instituted.

Phase 2: Medical Capabilities with regard to early detection, isolation and case management, contact tracing and prevention of onward spread

In case of suspected cases, the Medical Team has made the following arrangements both at the Mission HQ and at Team sites:

1. 15 isolation Centers.
2. 10 Quarantine Centers.

These establishments are in addition to individual accommodations that will be used as self-quarantine facilities. Actually, the Medical Team has already implemented a quarantining of 8 staff members successfully for 14 days from 24/03/2020 to 07/04/2020.

Phase 3: Testing

The current status involve 2 options: Sending test samples to either Khartoum or Juba. The Mission has leaned more towards the Juba option because of its ease due to UNISFA collaboration with MSF Hospital in Agok that has been carrying out the tests for the community. At the moment, the Mission has anti-body testing capabilities (i.e. anti-body test kits), but this test is not very useful in early detection of cases. The Mission is working with UNHQ to obtain alternative testing capabilities. For successful containment however, early detection, isolation and treatment are the key actions.

MEDICAL EVACUATION

Medical evacuation of any severe medical case that cannot be managed at Mission level will be done according to the established practice, rules and regulations. The Intra-Mission transfer of patients within the Box to HQ is in place. Evacuation of critical care-patients outside of UNISFA to higher level of care should be aligned with the WHO protocols and the respective Government's COVID-19 procedures in view of current flight restrictions. Suffice to add that no case has been confirmed in UNISFA and therefore no medevac for critical case has been conducted.

PSYCHOSOCIAL SUPPORT

UNISFA takes a comprehensive medical care/response to COVID-19, and therefore includes psychosocial support in addition to the above. The fear and uncertainties of COVID-19 is known to affect people's mental health, especially in terms of emotions and cognition.

So, to maintain your psychological balance, you should:

1. Stick to a routine: Go to sleep and wake up at a reasonable time, write a schedule that is varied and includes time for work as well as self-care.
2. Dress for the social life you want, not the social life you have: Get showered and dressed in comfortable clothes and do your self-care.
3. Keep your daily routine physical exercise: Which will help you to keep your physical strength and balance your biological processes.
4. Stay hydrated and eat well: This one may seem obvious, but stress and eating often do not mix well, and we find ourselves over-indulging, forgetting to eat, and avoiding food. Drink plenty of water, eat some good and nutritious foods, and challenge yourself to learn how to cook something new!
5. Limit social media and COVID conversation: One can find tons of information on COVID-19 to consume, and it changes minute to minute. The information is often sensationalized, negatively skewed, and alarmist. So, if you are at the mission area, depend on the news which you got from the mission broadcasts, news brief official communications and townhalls since this information are deeply filtered, monitored, and highly authenticated.
6. Notice the good in the world, the helpers: There is a lot of scary, negative, and overwhelming information to take in regarding this pandemic. But there also much more positive example and success stories even in the mission here. It is important to counterbalance the heavy information with the hopeful information.
7. Find lightness and humor in each day: There is a lot to be worried about, and with good reason. Counterbalance this heaviness with something funny each day whether it's on the internet or with your close friends.
8. Stay connected: Its very good mediator to the stress level to keep your self-connected with the family and close friends for chatting and get the social support which all of us need it.

All of us need to be supported, so do not hastate to call the staff counsellor on 3991 for any further needed support.

When to seek help

- When you start to develop negative emotions (e.g., aversion, anxiety, etc.)
- When you develop excessive avoidant behaviors and blind conformity.
- When you notice psychological changes in time through emotional and cognitive indicators (e.g. your moral judgements become harsher and social attitude becomes more conservative when considering issues such as difference and equality; your diplomatic attitude is being swayed during social interactions; etc.)

SPECIAL CONSIDERATIONS

LESSONS LEARNT: In order respond better to its clients, the Medical Team would like to streamline services and make improvements based on lessons learnt.

COMMUNICATION: In order to allay fear, apprehension and avoid rumour-mongering, the medical team recommends a dedicated forum, possibly through virtual Teams to provide timely and accurate medical information. A COVID-19 website for UN personnel is available at <https://www.un.org/en/coronavirus>.

CHALLENGES: Despite all the efforts put in and progress made so far, there are still a few challenges that the Medical Team will continue to address in order to ensure seamless and timely course in the following areas:

- **TESTING:** COVID-19 Testing is normally done in the Government designated Laboratories in collaboration with WHO. Abyei does not have either the Host Government or is there a WHO presence. Both Sudan and South Sudan are heavily burdened with COVID-19 Pandemic and have limited capacity to address Abyei specific COVID-10 related issues. However, UNISFA already has the anti-body testing kits and working with UNHQ on acquiring diagnostic equipment.
- **MEDEVAC:** Uncertain and prolonged clearance procedures. General resistance by all countries to accept COVID-19 cases hence no advanced health care facility is currently accessible.
- **QUARANTINE:** The Quarantine process needs to be streamlined. It has to be implemented by the Medical Team and no other section should be allowed to advise quarantine. This activity has a process with a lot of technical bearing on the epidemic containment. A mismanaged quarantine method can be disastrous leading to uncontrolled disease transmission and loss of lives.
- **STRESS:** Emergencies such as COVID19 trigger more psychological negative emotions and affect cognitive assessment as well, these negative emotions keep people away from potential pathogens when it refers to the disease. However, long-term negative emotions may reduce the immune function of people and destroy the balance of their normal physiological mechanisms.

Key Contact Telephone Numbers

Coordinator COVID-19
Task Force

3979

CMO / FMO

3283 / 3940 / 3319

Call Center (Hotline)

3030

Bar Assistant

4891

GCC

3293 / 4493

PX

3291

LATEST DEVELOPMENTS

- There is still no effective Treatment, nor any Vaccine developed for COVID-19
- Staff members can access doctors via telehealth applications, telephone or video calls, depending on the insurance plan have been made. Psychologists and psychotherapists can also be accessed remotely, find out more at Cigna International (UN WWP) – Cigna Global Telehealth: www.cignaglobal.com/
- Staff members can provide information on coronavirus symptoms directly into their own medical record through the EarthMed portal on iSeek. It will then register you in a special coronavirus programme, and medical staff will then be able to reach out to you personally with tailored care and advice no matter where you are in the world. For more details contact UNOE Level I Clinic at 3940 or 3283.



COVID-19 RELATED BROADCAST

Self-Isolation in case of COVID-19 Symptoms – Staff experiencing flu-like (Covid-19) symptoms; fever, cough, runny nose, breathing difficulties or any health related issues, must self-isolate in your accommodations and reach out to the UNISFA Medical Unit via Teams or phone;
Published 31/05/2020

Provisional Passenger Flights to Addis Ababa and Onward Destination – Mission is planning a flight from Abyei to Addis Ababa via Kadugli for the tentative date of Thursday 04 June 2020, subject to the approval of required clearances. Priority will be given to resident of Ethiopia or staff with onward connecting travel to their home country or destination;
Published 27/05/2020

Outpatient Medical Tele-Consulting – UNISFA personnel who are having any health-related issues are advised to reach out to the UNISFA Medical Unit, based on diagnosis, Doctors will recommend further course of action;
Published on 20/05/2020

Review of Entitlements for staff under Flexible Working Arrangements – only danger pay and accrual of qualifying service for R&R will be discontinued. There will therefore be no suspension of the payment of non-family allowance and hardship allowance;
Published 13/05/2020

New Schedule of Office Cleaning – office cleaning which will happen every Friday and Saturday on normal working hours;
Updates published every Thursday

Maximum number of customers in PX – maximum of ten, must maintain the minimum of 2 meters distance and be masked;
Published on 12/05/2020

Wearing of Surgical Masks by UNISFA Personnel – until further notice, all UNISFA personnel must wear Surgical Masks at all times in all areas;
Published on 06/05/2020

MLT Instructions on COVID-19 – UNISFA Sections and Units, as well as AFPs are required to implement contingency plan decisions/instructions;
Published on 5/05/2020

UNISFA Recorded Townhall Meeting – Mission Updates on COVID-19 - 04 May 2020.
Published on 5/05/2020

For Questions

Kindly send an email to the UNISFA
COVID-19 Task Force :

UNISFA-COVID-19-Task-Force@un.org



Critical thinkers

Please call **3194** to collect
your gifts

Congratulations to the following staff members who provided the correct answers to the quiz in the last broadcast:

Daphne Roy-George / Major Gyankaji Shrestha /
Moyana Midzi / Lt Col Habtamu Gebre