In February 2014, Internews launched a new Humanitarian Information Service (HIS) in Awerial County, Lakes State, to provide critical information to host community members and the approximately 100,000 internally displaced persons (IDPs), mostly displaced by the fighting from neighboring Jonglei State. Mingkaman 100 FM is an emergency “radio-in-a-box” setup within Mingkaman that broadcasts approximately 11 hours per day, Monday to Sunday, between the hours 8am–12pm, 2-5pm, and 7–10pm. The radio station is located in a “humanitarian hub” operated by the Agency for Technical Cooperation and Development (ACTED), an international NGO that manages the compound and provides generous support, including sharing of the generator and fuel.

In order to reflect the voices of the community, Internews recruited and trained community correspondents both from the host community, as well as those who had been affected and displaced from their homes. The radio station serves as a platform for people to discuss issues, share ideas, and ask questions of each other and humanitarian agencies operating in the area.

Two months after going on air, in April 2014, Internews distributed 2,400 free solar-powered wind-up radios to the IDPs and host community in Mingkaman and the first wave (Wave 1) of surveying on information needs was conducted. During Wave 1, a total of 577 observations were collected among the IDPs and host community living in the Mingkaman area.

A second survey, Wave 2, was conducted in August 2014 to establish a better understanding of media access and trust during conflict, as well as the impact of the new station. In addition, Wave 2 also investigates the information needs in the Mingkaman area given the ongoing HIS programs, including the distribution of free radios in the area and the broadcasts of Mingkaman 100 FM. In total, 623 observations were collected among the IDPs and host community living in the Mingkaman area.

Although the focus of this snapshot report is to highlight findings from Wave 2, key findings from Wave 1 are also provided to further contextualize the more recent survey. Findings from both surveys will be compared to the HIS studies done in other sites in a forthcoming comprehensive report to provide an evaluative approach to understanding the best way to establish an HIS and to have the greatest impact.
Recent political events have dramatically changed the landscape of South Sudan, with more than 1.7 million people displaced, and access to media and information at a premium. A series of studies on the Humanitarian Information Service (HIS) projects implemented by Internews in Central Equatoria, Upper Nile and Unity states from January 2014 to date, aims to identify how best to reach displaced populations with the information they need to make informed decisions about their lives. Wave 2 of these studies will additionally aim to assess impact and provide insight into future programmatic choices. The research presented here is a brief summary of the two waves of research conducted in the Mingkaman area. It represents two of nine studies conducted in six different sites that have experienced massive displacement and conflict (Tong Ping, UN House and PoC 3 in Juba; Mingkaman, Leer and Malakal), and in which Internews is implementing an HIS Project.

The small town of Mingkaman in Awerial County, Lakes State, South Sudan has been host to an increasing number of IDPs since the December 2013 conflict. After fighting that had started in Juba last December quickly spread to other areas of the country, the town of Bor, the state capital of Jonglei, became one of the main battlegrounds and was quickly destroyed. Many residents fled by boat up the river Nile and settled around 20 kilometers upstream in the small town of Mingkaman. The majority of families sleep in the open, or under the shade of trees and bushes.

As the IDP population grew rapidly at Mingkaman, it became apparent that an absence of humanitarian and other information had become a serious threat to the livelihoods of both IDPs and residents. In February 2014, Internews established an emergency portable radio station – Mingkaman 100 FM – to provide humanitarian news and information to IDPs and members of the host community. The Mingkaman 100 FM studio is set up in a shelter constructed from plastic sheet with a traditional grass roof. Inside there is basic and easily transportable studio equipment, including an audio mixing unit, transmitter and microphones. There are five reporter/producer kits, which contain computers and audio recorders. Within a day of the station being built more than 70 people applied to work there. Those who applied had no previous experience, but the 10 selected candidates received extensive training on site at the station, as well as in Juba.

The main function of the station is to provide humanitarian news and information for IDPs and members of the host community. According to camp coordination data from the International Organization for Migration (IOM), since July 2014 there have been a total of 99,287 IDPs and members of the host community in the Mingkaman area. The station has a potential broadcast radius of 20 to 30 km that covers the entire Mingkaman Boma.

In April 2014, following multiple cluster meetings with partnering non-governmental organizations (NGOs), meetings with community leaders, and brief snap surveys conducted throughout the area, it was determined that despite the radio station, access to information was still limited as there was a lack of radio sets for people to listen to the radio. Individuals residing in and around Mingkaman needed to hear information regarding the upcoming rainy season, vaccination campaigns, education, water access and more, pushing Internews to expedite a radio distribution program to supply 2,400 solar-powered hand cranked radio sets. Forcier Consulting had originally planned on conducting a baseline survey prior to the radio distribution, followed by a second wave of the survey a few months later. However, as the situation on the ground necessitated that radios be distributed sooner, the first wave of research, conducted April 11-17, happened after the radio distribution, and is therefore not a true baseline. The present study (Wave 2) is a follow up to the survey that took place in April. Wave 2 aimed to investigate the information needs in the Mingkaman area, especially the extent to which they have been served by the ongoing HIS programs, including distribution of free radios in the area four months prior. Where possible, comparable data is utilized and findings from both are shared in this report.
Key Findings from Wave 1 (April 2014)

Although the questionnaire differed slightly, the key findings from Wave 1 help contextualize Wave 2 findings. Key findings from Wave 1 are presented in this section, with a focus on instances of directly overlapping questions. A total of 577 respondents participated in the Wave 1 survey, the majority (85%) of whom were IDPs. Of the total survey population, 239 respondents were male and 338 female. Respondents were asked to recall information from November 2013, as a proxy for information needs in the period before the crisis of December 2013. Therefore, differences cited between the two time periods are based on survey respondents’ recollections as of April 2014, rather than a baseline data set that was collected at that time.

Information Needs
At the time of the Wave 1 survey, just days after a radio distribution program, the information needs among IDPs in Mingkaman were stark.

- Between November 2013 and April 2014, information continued to be very important to IDPs, but fewer IDPs reported having enough information to make good decisions. November 2013, the majority (84%) of IDPs felt it was very important to be able to get information for themselves and their family. In April 2014, the majority of IDPs feel that it was very important to get information for themselves and their family (85%). But by April fewer IDPs reported having enough information to make informed decisions. Nearly one quarter (24%) of IDPs reported that they had enough information to make informed decisions for themselves and their family in November 2013. However, this rate decreased to 18% in April 2014. This decrease in adequate access to information was especially prominent among female respondents, as 23% reported having all the information they needed to make informed decisions in November 2013, compared to 13% who reported currently having all the information they need to make informed decisions.

- Concern over personal health (76%) and safety (81%) were high, indicating that access to reliable information was needed. Male respondents reported higher rates (81%) of being very concerned about their health and the health of their families than female respondents (73%), though rates were more consistent among gender for those who reported they were somewhat concerned about their health and the health of their family.

- Overall, respondents were found to have a large demand for information, as approximately one-fifth (23%) of survey respondents reported that they almost constantly have questions they would like answered.

Sources of Information

- Radio was the most popular, trusted, and preferred source of information. The majority of respondents (72%) identified radio as the most popular source of information. IDPs were more likely than residents to identify radio in this manner, though radio retained its top position for all groups when disaggregated by residence status and gender. Radio was also the most trusted and preferred source of information (62%).

Access to Radio

- Nearly one-fifth (18%) of survey respondents reported receiving a radio during Internews’ radio distribution program earlier in the month (April 2014). Almost half of respondents (47%) had access to a working radio with 18% reporting that they had received a radio as part of the distribution program. In general, both general radio listenership and the regularity of listening were higher among radio recipients than non-recipients.

- In April 2014, two months after broadcasting began, Mingkaman 100 FM had near unanimous listenership (97%) among respondents with access to a working radio. Other popular stations included: Radio Miraya (43%) and the BBC World Service in English (16%).

- The most important information needs involved news and information in and around the immediate area. Respondents identified general news on what was happening in the immediate area as the single most important information need (27% of respondents identified this topic as most important). In addition, information on how to register for aid and get shelter/accommodation ranked high among all groups (with females ranking these topics slightly higher than males). Information related to security was also identified as important (with males ranking this topic slightly higher than females).

- Health and safety are major concerns for everyone. When asked generally about their concerns regarding the health and safety of themselves and their families, the vast majority of residents (89%) and IDPs (80%) reported being very concerned about their safety. Likewise, a majority of residents (74%) and IDPs (77%) reported being very concerned about their health.

- There was a significant gender gap in access to key forms of media. Fewer female respondents have access to radios (36%) and mobile phones (36%) than male respondents (62% have access to a radio; 50% have access to a mobile phone). In addition, fewer female respondents (12%) received a radio than male respondents (27%) during the free radio distribution in early April 2014. Female respondents were more likely (53%) to have a mobile phone without a radio than male respondents (29%). Female respondents were also more likely (84%) than male respondents (73%) to report that their mobile phones did not have Internet access.
Key Findings from Wave 2 (August 2014)

**Radio**
- 42% Have radio access in Mingkaman
- 18% Of those with radio access own the radio itself (among those with access to a radio that was not received during the April 2014 radio distribution)
- 83% Of radio listeners tune in with others
- 92% Of radio listeners tune in to Mingkaman 100 FM, the most popular station in the area
- 60% Of radio listeners (who named 1+ station) listen at least once daily
- 11% Received a radio during a distribution in April 2014

**Behaviors**
- 12% Wash hands with water only after using latrine
- 83% Wash dishes or utensils in drainage channel
- 85% Have 1+ family member who has been vaccinated
- 84% Of those with 1+ family member vaccinated at Mingkaman said cholera was a vaccination received
- 8% Sleep under a mosquito net ‘zero times per week’ while at Mingkaman but…
- 54% Sleep under a mosquito net ‘all the time’
- 36% Of those not living in Mingkaman before November 2013 left the area at least once at some point in the few months prior to interview in August
- 51% Talk with aid workers at least once over the course of a normal week
- 47% Talk with a community leader at least once over the course of a normal week

**Mobile Phone**
- 26% Have mobile phone access in Mingkaman
- 82% Of those with mobile phone access own it themselves
- 15% Of those with mobile phone access use an internet-enabled handset
- 62% Of those with mobile phone access prefer info contact as a call rather than text
- 31% Of those with mobile phone access would sign up to receive info on activities/services via SMS
Key Findings from Wave 2 (August 2014) (cont...)

**Info Needs & Resources**
- 20% Say they have 'none' of the info they need to make good decisions but...
- 32% Say they have ‘all’ of the info they need to make good decisions
- 41% Of those who have received at least some decision making info on site, use the Mingkaman 100 FM for this purpose
- 38% Of those who know their sources of information consider Mingkaman 100 FM their most trusted information source
- 32% Consider Mingkaman 100 FM as the best way to receive information
- 27% Consider ‘general news’ in the area as their most important information need

**Healthcare Services**
- 36% Are aware of mental health services at Mingkaman
- 70% Knew of at least one general health clinic in the area
- 82% Described themselves as ‘informed’ about malaria prevention
- 85% Described themselves as ‘informed’ about diarrhea prevention
- 85% Described themselves as ‘informed’ about cholera prevention
- 87% Described themselves as ‘informed’ about protecting themselves outside the area
- 84% Described themselves as ‘informed’ about where to go if hurt or attacked
- 66% Are ‘very concerned’ about the health of themselves or family while in Mingkaman
- 71% Are ‘very concerned’ about the safety of themselves or family while in Mingkaman
Many people are worried about personal health and safety in Mingkaman:

Nearly three-quarters (71%) of respondents are ‘very concerned’ about their safety and the safety of their families, with an additional 16% ‘somewhat concerned’ about it. Two-thirds (66%) of respondents are ‘very concerned’ about their health and the health of their family, with an additional 16% ‘somewhat concerned’ about it. While concern remains high, these rates are a decrease from levels in April 2014, where 81% said they are ‘very concerned’ about their safety and 76% were ‘very concerned’ about their health.

'Site local' news forms the top information priorities for the community in Mingkaman:

Informational content that respondents wanted most included local issues regarding the site. These information priorities did not change substantially from those reported in Wave 1.

Top 5 topics of most interest to the community of Mingkaman:

1. General news about the Mingkaman site 27%
2. How to get shelter/accommodation 19%
3. How to get food 10%
4. How to get healthcare/medical attention 6%
5. The security situation in the Mingkaman area 5%

More information is required by the community in Mingkaman for good decision-making purposes, though information access is improving:

Referring to the time of survey (April 2014), only 17% of the population had all the information they needed, while in Wave 2, that number increased to 32%. In addition, the percentage of people who say they only have ‘some’ or ‘none’ of this information they need, decreased from 81% to 62%.
Mingkaman 100 FM is the main source for decision-making information for the community in Mingkaman: At 41%, Mingkaman 100 FM was specified most often as the main source for decision-making information by the community in Mingkaman, followed by radio in general at 30%.

Top sources of information used for good decision-making in Mingkaman (among those who have ‘at least some’ info of this type while being in the area, N=459)

Mingkaman 100 FM was specified by 41% of respondents as their preferred means of receiving information while living in the area: Mingkaman 100 FM was specified by 32% of respondents as their preferred as a means of receiving information, followed by radio in general, at 23%.

In addition, Mingkaman 100 FM was the most commonly preferred means of receiving information while living in the area: Mingkaman 100 FM was specified by 32% of respondents as their preferred as a means of receiving information, followed by radio in general, at 23%.

In terms of access to radio, less than half (42%) of respondents say they have it. Among those with access to a radio (that was not received during a radio distribution), less than one-fifth (18%) of them own the radio themselves, which is an important benefit in terms of how much control they may have over the stations tuned in to.

While radio access is relatively low, those who have access tend to listen frequently and most often to Mingkaman 100 FM. When radio listeners tune in, they are most commonly listening to Mingkaman 100 FM (92%), while other stations have listenership rates of under 10%. While the availability of Mingkaman 100 FM likely plays a factor in such high rates of listenership, this finding suggests that the station has been effective at reaching audiences. For those that have access to a radio and know the stations they listen to, listening is frequent, with 60% listening more than once a week.

At least 11% of Wave 2 respondents received a radio set during the distribution in April 2014, but this figure could be higher. 8% of respondents reported that they received a radio at some point other than April. As this question was posed four months after the large, targeted radio distribution, it is possible that those who received a radio in April mistakenly recalled receiving it in a different month. In Wave 1 (April 2014), 18% of respondents reported that they received a radio earlier that month.
What do we know about IDPs’ health knowledge at Mingkaman?

Regarding disease and illness prevention, the Mingkaman community reports they feel informed: Based on self-assessment of how much illness prevention knowledge respondents had, 85% felt informed about diarrhea, 85% about cholera, and 82% about malaria prevention.

Despite being well informed, concern over health is a concern for many: Two-thirds (66%) of respondents are ‘very concerned’ about their health and the health of their families, with an additional 16% are ‘somewhat concerned’ about it.

The Mingkaman community’s knowledge about mental health issues and services in the area was weaker compared to their familiarity with clinical disease issues: Only 36% were aware of mental health services being available in the area, while 33% did not know why such services would be sought. However, knowledge of which health services are available at Mingkaman was fairly high: 70% of respondents reported knowing of at least one healthcare clinic in the area. Of those who knew of healthcare clinics, stomach pain, vaccination, and cholera were cited as the most common services provided.

What do we know about behaviors of the community in Mingkaman?

Respondents in Mingkaman demonstrated mixed water, sanitation, and hygiene (WASH) behavior, pointing to room for improvement: The majority of respondents (90%) reported washing their hands after using a latrine, with 78% reporting they used soap as well as water, a positive behavior. However, nearly two-thirds (63%) of respondents or their families wash dishes or utensils in a drainage channel.

Likewise, the use of mosquito nets is sporadic among those surveyed in Mingkaman: Just over half (54%) or respondents claim that they sleep under a mosquito net ‘all the time’ and that no members of their household do not sleep under a mosquito net (54%). However, the other half of respondents reported sporadic usage of mosquito nets, with a third (33%) sleeping under a net four times or less (including not at all) during a typical week. Similarly, 43% of respondents claimed that at least one person in their household does not typically use a mosquito net in a week.

How often do you sleep under a mosquito net in the course of a normal week?

Most (85%) respondents in Mingkaman reported that at least one member of their family had been vaccinated: Vaccination up-take typically included several members of the household, with only 7% of respondents who had a member of their household vaccinated reporting that they were the only person to be vaccinated.

The most commonly received vaccinations in Mingkaman were for cholera and measles: 84% of Mingkaman respondents reported someone in their family receiving a cholera vaccination, as did 61% of respondents for measles; the next most commonly received vaccinations were for polio (45%) and tetanus (23%).
Face-to-face interviews, conducted via Computer Assisted Personal Interviewing (CAPI) with adults aged 15+; through random walks with a Kish Grid

The area surveyed was characterized by fluctuations in population and temporal challenges that may limit the comparability of findings from the present report with future surveys and assessments.

As definitive figures on the proportions of IDPs against the host community were not available, the sample strategy did not include targets for each of these groups. However, Internews selected enumeration areas with intent to capture observations from areas known to contain a high number of IDPs that were in range of Mingkaman 100 FM broadcasts. As such, while figures for each group are available, responses cannot be weighted, which would allow for stronger comparison between the two. The Wave 2 findings presented in this report comprise observations from IDPs as well as the host community; Wave 1 findings also comprise of members of the host community and IDPs unless otherwise noted.

<table>
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<tr>
<th>Methodology</th>
<th>Face-to-face interviews, conducted via Computer Assisted Personal Interviewing (CAPI) with adults aged 15+; through random walks with a Kish Grid</th>
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<td>Sample size</td>
<td>623 completed interviews</td>
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<td>Market scope</td>
<td>Population of IDPs and host community in Mingkaman, Awerial County, Lakes state, estimated to be 100,000 as of July 2014</td>
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<td>Questionnaire design</td>
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<td>Fifteen enumerators, two field researchers, one field team leader</td>
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<td>Wave 1 findings</td>
<td>Where possible, data from the first wave (577 observations) in April 2014 is also referenced</td>
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</tbody>
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Limitations

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1 Camp Coordination and Camp Management "Displacement Tracking Matrix: Round IV Site Profile Generator" July 2014