The COVID-19 virus is mainly transmitted through respiratory droplets and contact with infected surfaces or objects. Current evidence suggests that symptomatic COVID-19 cases account for most of the transmission. The incubation period for COVID-19, which is the time between exposure to the virus and symptom onset, is on average 5-6 days, but can be as long as 14 days. During this period, also known as the "pre-symptomatic" period, some infected persons can be contagious and therefore transmit the virus to others.

Wearing a medical mask is one of the prevention measures that can limit the spread of certain respiratory viral diseases, including COVID-19. Although there are potential advantages of the use of mask by healthy people in the community setting include reducing potential exposure risk from infected person during the "pre-symptomatic" period and stigmatization of individuals wearing mask for source control, the potential risks need to be considered. These include risks such as self-contamination, potential breathing difficulties (depending on type of mask), false sense of security, diversion of mask supplies from health care workers and diversion of resources from effective public health measures.

WHO offers the following advice to decision makers so that they apply a risk-based approach to use of masks for healthy people in community settings. Decision makers should consider:

a) Purpose of mask use: the rationale and reason for mask use should be clear—whether it is to be used for source control (used by infected persons) or prevention (used by healthy persons)

b) Risk of exposure to the COVID-19 virus in the local context

c) Vulnerability of the person/population to develop severe disease or be at higher risk of death
d) Setting in which the population lives in terms of population density, the ability to carry out physical distancing (e.g. on a crowded bus) and risk of rapid spread (e.g. closed settings, slums)

e) Feasibility in terms of availability and costs of the mask, and tolerability by individuals

f) Type of mask, that is, medical mask versus non-medical mask

CDC recommends wearing cloth-face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies), especially in areas of significant community-based transmission. CDC also advises the use of simple cloth-face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others.

South Sudan would like to adopt the use of cloth-masks as an additional public health measure due to the observed difficulty of observing social distancing in South Sudan, while applying the risk based approach as recommended by WHO. The main purpose of the masks will be source control, in the event that there is already on-going undetected community-based transmission where asymptomatic and pre-symptomatic individuals may be transmitting the disease.

The following guidance as recommended by CDC will be adopted:

1. Cloth masks/face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

2. The cloth masks/face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by both CDC and WHO.

3. The cloth masks/face coverings should be washed regularly depending on the frequency of use.

4. Care should be observed when removing the cloth mask/face covering: individuals should be careful not to touch their eyes, nose, and mouth when removing it and wash hands immediately after removing.

As recommended by WHO for consideration in the case where a country adopts use of non-medical masks, the following features related to non-medical masks will be taken into consideration: numbers of layers of fabric, breathability of material used, water repellence/hydrophobic qualities, shape of mask and the fit of mask. Following specifications from CDC in this regard, the cloth mask should:

- fit snugly but comfortably against the side of the face
- be secured with ties or ear loops
- include multiple layers of fabric
• allow for breathing without restriction
• be able to be laundered without damage or change to shape

The Ministry of Health of South Sudan therefore provides this advice in regards to community use of appropriately designed cloth masks in public settings particularly where social distancing measures are difficult to maintain:

A. In view of the high proportions of asymptomatic cases as shown by studies in other countries as well as developing COVID 19 situation in South Sudan, the possible benefit of use of cloth Masks in slowing down the spread of the virus particularly with people who may have the virus and do not know of transmitting it to others. The advice on the use of the appropriately designed cloth mask would be purely voluntary.

B. With this advice, it is important to note that the use of a masks alone is insufficient to provide an adequate level of protection against COVID-19, and other preventive measures need to be practiced and adhered to. These include:
• practicing social distancing of at least 1 meter
• washing hands with soap and water or using a sanitizer
• cleaning and disinfecting surfaces regularly
• avoiding touching eyes, nose and mouth with unwashed hands
• practicing respiratory etiquette by coughing or sneezing into one’s elbow or a tissue paper that should be immediately appropriately dispensed.

Use of Cloth masks is however, not considered appropriate for health care workers.

Studies that evaluated use of cloth masks in health care facilities found that health care workers using cotton cloth masks were at increased risk of infection compared with those who wore medical masks. Medical masks and N95 respirators should be reserved for health care workers, in view of the global shortage of supplies.