



# MALARIA CONSORTIUM: SOUTH SUDAN

DISEASE CONTROL, BETTER HEALTH





# WHO WE ARE

Malaria Consortium is one of the world's leading non-profit organisations dedicated to the comprehensive control of malaria and other communicable diseases – particularly those affecting young children - in Africa and Southeast Asia.

We work with communities, government and non-government agencies, academic institutions, and local and international organisations, to ensure good evidence supports delivery of effective services. Malaria Consortium also provides support for a number of programmes designed to combat neglected tropical diseases.

Malaria Consortium has been working in the now independent Republic of South Sudan (RoSS) since 2005. After the Comprehensive Peace Agreement was signed, the Ministry of Health (MoH) requested Malaria Consortium's assistance to support the development of its policy environment and evidence base. The MoH Malaria Strategy is one example of policy work developed in partnership with Malaria Consortium.

In South Sudan 2.5 million children under five are at risk of malaria





# WHAT WE DO

The control of malaria defines the core of Malaria Consortium's work globally. Our five programmes in South Sudan include:

## COMMUNITY CASE MANAGEMENT

Access to prompt and effective treatment is a key challenge to improving health outcomes in South Sudan. Working with the MoH to address this through the rolling out of an integrated community case management programme (ICCM), Malaria Consortium works at community level in hard-to-reach areas to increase access to treatment for common childhood illnesses, including diarrhoea and pneumonia in children under five.

## HEALTH SYSTEMS STRENGTHENING (HSS)

Malaria Consortium provides broad support to the MoH, ranging from policy development, to capacity building for health workers to implement such policies. Health systems strengthening also include training in health management information systems (HMIS) and integrated essential child health care at County Health Department level. Extending the reach of the HMIS, via training for MoH staff at county and state levels, will be a key area of focus for 2012.

## NUTRITION

Malaria Consortium is running an innovative programme to assess and treat malnutrition alongside its ICCM programme. By addressing the causes and effects of the three leading causes of death in children - malaria, pneumonia and diarrhoea, the nutrition programme aims to have a positive impact on childhood mortality.

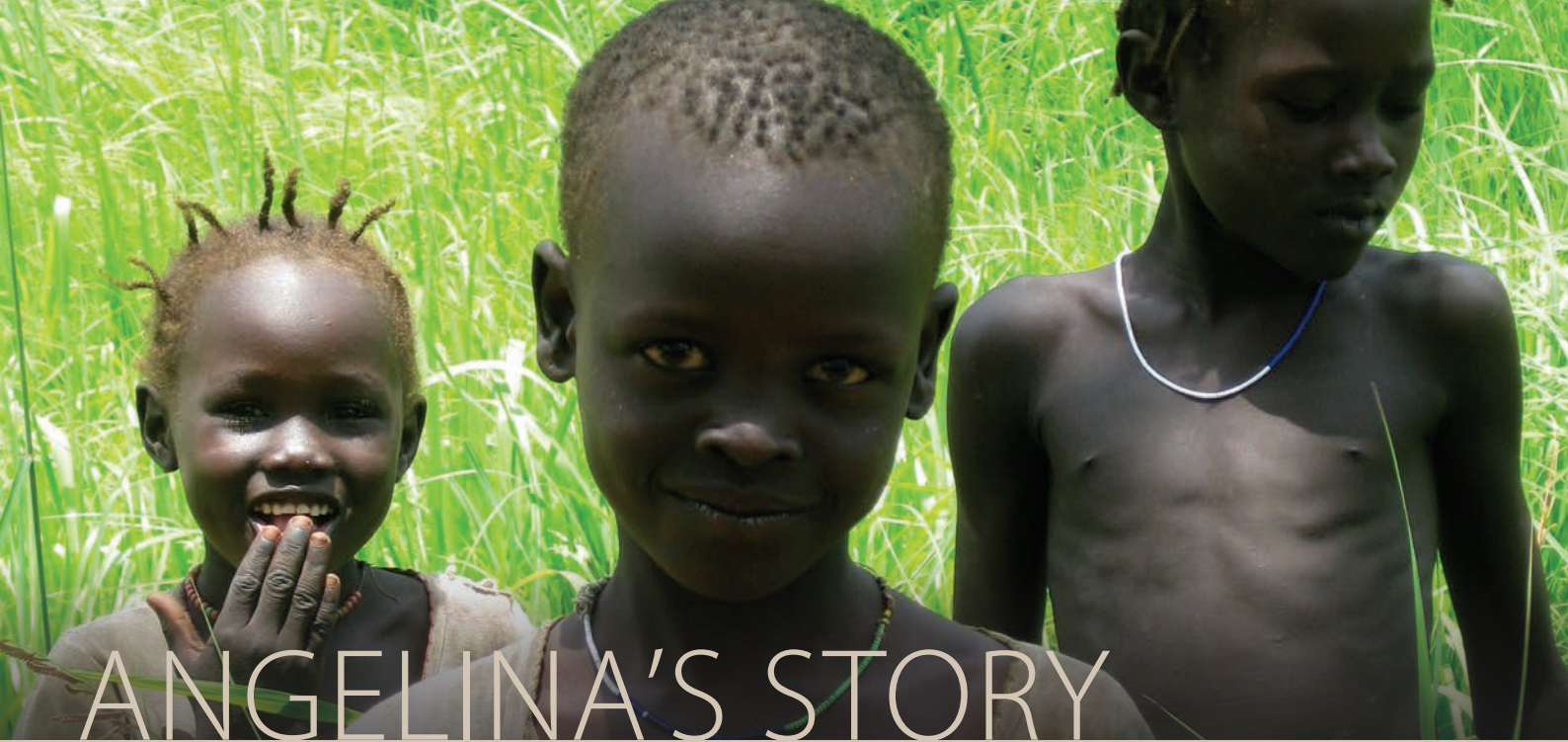
## NEGLECTED TROPICAL DISEASES (NTDs)

Malaria Consortium has supported the MoH to implement a national programme for integrated neglected tropical disease control since 2007. The programme targets five NTDs and focuses on conducting rapid assessments, surveys and subsequent mass drug administration where NTDs are found. We are currently seeking funding to continue this area of work in 2012 and beyond.

## OPERATIONAL HEALTH RESEARCH

Malaria Consortium conducts health research and assists the MoH to map, review and synthesize all research carried out in relevant areas – NTD mapping is one good example. Current work includes an 18-month pilot to provide a sustainable way of replacing long-lasting insecticidal nets (LLINs) in households where nets may have been lost or destroyed in Lainya County (Central Equatorial State).





# ANGELINA'S STORY

Angelina is a Community Drug Distributor (CDD) who has received training through Malaria Consortium so that she can diagnose and treat malaria, pneumonia and diarrhoea.

Angelina has treated eight children under five in the past 13 days in her village in Aweil West County. "The community is very relieved to have me as a CDD. As soon as a child is sick, including my own, I can treat them. In the

past they had to go to a clinic which is many hours walk away," she says. The previous day, Ahok Lual brought her seven month old daughter Aluat Deng to see Angelina, as she had been sick for a few days. Angelina examined Aluat and diagnosed her with malaria. She gave her the first treatment at her house, and then showed Ahok Lual how to break the tablets in half so that the dosage was correct for the child's age. Ahok said that Aluat quickly improved after taking the medicine.

Angelo Agany is Angelina's supervisor. He has a total of 16 CDDs under his supervision who he visits twice per month. When asked what the biggest challenge in his role is, he says that he is facing problems with the rains, which hamper his ability to continue to supervise the CDDs who live across the river from him. The rains last for six months each year and present the biggest challenge to all Malaria Consortium's operations in South Sudan.



LEFT HAND PICTURE  
Ahok Lual with daughter  
Aluat Deng

RIGHT HAND PICTURE  
CDD Angelina with her  
supervisor Angelo





Malaria Consortium wishes to thank its donors and partners who have included:

- ADRA SSHiNE
- Canadian International Development Agency
- Government of South Sudan Ministry of Health
- Global Fund for AIDS, TB and Malaria
- Johns Hopkins
- Population Services International
- UK Department for International Development
- United Nations Children's Fund
- United Nations Common Humanitarian Fund
- United States Agency for International Development

IN ADDITION TO THE EXCELLENT SUPPORT MALARIA CONSORTIUM HAS RECEIVED FROM DONORS AND PARTNERS, MALARIA CONSORTIUM WOULD LIKE TO GIVE SPECIAL RECOGNITION TO THE HARD WORK AND CONTRIBUTIONS OF VOLUNTEERS AND STAFF WHO HAVE MADE OUR WORK SUCCESSFUL



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