

## Building resilient communities in South Sudan

### Improving access to integrated healthcare in flood-affected communities through static and mobile clinics in Aweil South

#### Background

Over the past four years, conflict and flooding in South Sudan have resulted in the displacement of approximately 1,338,620 people.<sup>[1]</sup> In 2021 alone, devastating floods in Aweil South county led to the further temporary internal displacement of more than 4,500 people across four out of six *payams* (wards).<sup>[1]</sup> The floods have destroyed much of the infrastructure, and functioning health facilities operating in the region are already few and under-resourced. Flooding has also exacerbated healthcare access, where many individuals live more than 10km away from a functioning health facility.

Lack of access to healthcare, safe water and sanitation, adequate food, shelter and employment puts the population at high risk of preventable diseases, such as malaria. Those most susceptible include children under five, pregnant and lactating women, older people and those living with disabilities, including mental health issues.

The recent return of an estimated 12,300 previously displaced people at the end of 2020, combined with those who were displaced in the 2021 floods, has led to increased pressure on health services in Aweil South to address the specific health requirements of the diverse population.

#### Country

South Sudan

#### Donor

Office for the Coordination of Humanitarian Affairs through the South Sudan Humanitarian Fund

#### Length of project

September 2021 – August 2022

#### Partners

Aweil South County Health Department  
Impart Health Organization  
Health Pooled Fund  
Northern Bahr el Ghazal State Ministry of Health  
World Health Organization

## Project outline and objectives

With support from the South Sudan Humanitarian Fund, Malaria Consortium is working with communities to expand the reach of integrated health services through mobile and static health clinics.

We are targeting a combined 32,889 internally displaced people, returnees and the host population in flood-affected areas of Aweil South county to close the gap in access to health facilities. In response to the floods — and, consequently, greater dispersion of a population living with inadequate infrastructure — we aim to reduce the distance that people need to travel to access integrated healthcare services. The main project objectives are to:

- reach 95 percent of the target population in need of medical services in Aweil South
- improve access to and utilisation of integrated life-saving quality healthcare services to flood-affected populations and those living in vulnerable circumstances, through static and mobile community-based health service delivery systems
- increase the number of functional health facilities in Aweil South, from nine to 11, that provide primary healthcare services
- reduce excess morbidity and mortality of epidemic-prone diseases and health insecurities
- increase access to services for survivors of sexual and gender-based violence (SGBV), people living with disabilities and mental health issues, and older people
- accomplish a minimum of 65,778 additional consultations, assuming two visits per person per year.

## Activities

To achieve the project objectives, we will work with partners to:

- provide integrated mobile health services to 17 hard-to-reach locations, selected for their distance from the nearest functional health facility

- refer complicated cases in need of basic services to health facilities
- deliver integrated health services to include:
  - clinical management for survivors of SGBV
  - routine immunisation services, including administering 6,377 measles vaccinations in children aged six months to 14 years, as well as establishing 17 expanded programmes of immunisation outreach points and default tracing by *Boma* health workers (BHWs) and community leaders
  - malnutrition screening for children under five
  - pre- and antenatal care for pregnant and lactating women at Majak Goi and Maachrol Primary Healthcare Units (PHCUs)
- provide essential drugs and medical/laboratory supplies to the two PHCUs and one mobile health clinic for malaria case management services and outpatient department consultations; this includes procurement and distribution of drugs, as well as last-mile distribution of medical supplies for supported health facilities and mobile teams
- conduct inventory counts and drug stock reporting, and repositioning of health supplies during the rainy season
- recruit and train clinical and support staff for both static and mobile clinics in selected Basic Packages for Health and Nutrition services modules, including those relating to maternal, newborn and child health and communicable diseases
- engage community structures, such as the local *Boma* chiefs, BHWs and health facility committees, to make patients aware of the nearest healthcare points
- support community surveillance systems and distribute 1,500 information, education and communication materials to raise awareness of key health issues.



## Reference

1. International Organization for Migration displacement tracking matrix. Round 9. [no date; cited 2022 Feb 07]. Available from: <https://displacement.iom.int/south-sudan>.

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**Cover image:** Health education session at a mobile clinic in Wuncum *payam*, Aweil South county

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