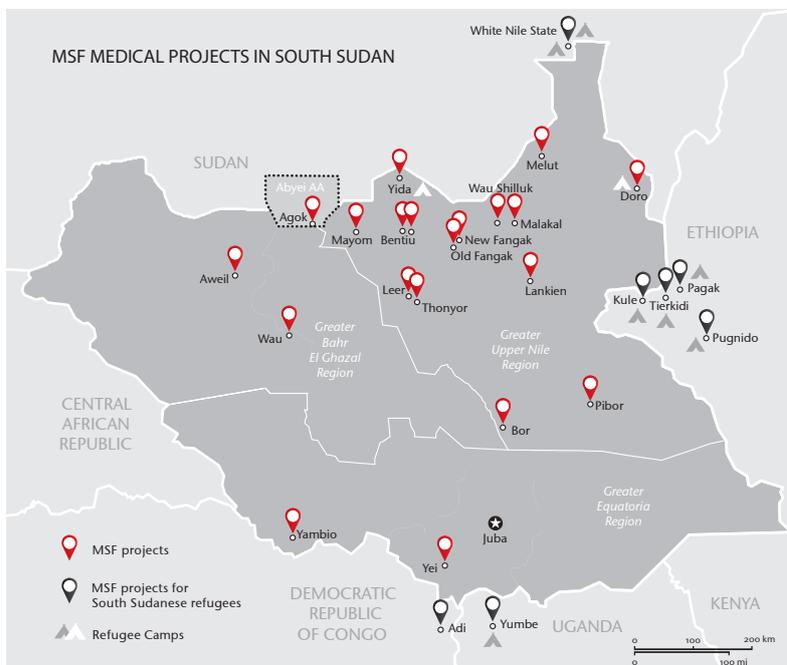


MSF South Sudan Activity Update

January 2017



Medical aid where it is needed most
Independent - Impartial - Neutral



MSF IN NUMBERS Oct-Dec 2016



Almost **257,000** outpatient consultations, of which **67,000** for children under 5 years old



13,500 patients hospitalised, including almost **4,800** children under 5 years old



1,394 surgical operations and **1,115** violence-related injured patients



More than **80,000** patients treated for malaria



2,225 patients treated for malnutrition, of which **612** admitted for intensive treatment



2,319 babies delivered

MSF OPERATIONS IN RESPONSE TO THE MEDICAL NEEDS IN SOUTH SUDAN AND ABYEI

MALARIA

Between October and December 2016, MSF treated more than 80,000 people suffering from malaria across South Sudan and in Abyei. The malaria peak was very high in some areas in the country. In addition to the regular activities in the country through our hospitals and primary healthcare centres, some extra measures were put in place by MSF teams responding to the endemic malaria peak season. In several locations, mobile clinics and malaria posts were established to reach those with limited or no access to health facilities and to provide them with treatment in the early stages of the disease. This was especially important during the rainy season, when road conditions deteriorate and patients may have to walk for many hours to reach a health facility.

In Aweil, MSF teams faced a particularly high malaria peak, treating more than 10,000 people from June to December. More than half of the children with malaria required inpatient treatment. MSF supported five primary healthcare centres in the counties surrounding Aweil by providing lifesaving drugs, training for the management of severe malaria, referrals to the hospital in Aweil etc. MSF teams also expanded their activities by increasing the capacity of the hospital by an extra 150 beds to deal with the influx of patients and hired an extra 200 health workers.

In Maban county, where MSF is providing primary healthcare to refugees in Doro camp and to the host community in Bunj, the teams provided mosquito nets to more than 21,000 people in October. Twenty villages around the town of Bunj were supplied with mosquito nets as a preventive measure. Between mid-September and early December, malaria mobile clinics were also held in seven locations in Maban county, at which 6,663



out of almost 10,000 people tested positive for the disease. The aim was to treat those people who could not easily reach MSF's clinic in Bunj.

In Agok, several mobile malaria posts were established between September and December for the second year in a row. The aim was to provide access to prompt malaria diagnosis and treatment in the communities, and also to reduce the burden on hospital staff, freeing them up to focus on the most severe cases. These were staffed by up a network of 48 'malaria agents' – all volunteers from the local community – supervised by six community health workers, to diagnose and treat malaria in 22 villages within a 30-km radius of the town of Agok. At the mobile posts, more than 30,000 people tested positive and were treated for malaria.

CHOLERA

After the Ministry of Health declared an outbreak of cholera in Bentiu Protection of Civilians (PoC) site in October, MSF had treated more than 880 people with cholera symptoms by the end of December 2016. The outbreak is still ongoing. More than 380 of those treated were children under five. To deal with the influx of patients, the team in Bentiu, where MSF runs a 170-bed hospital, set up a 30-bed cholera treatment centre, where 388 (41%) patients were admitted for treatment.

Thanks to cooperation between all the health organisations working inside the PoC, 57% of patients were treated as outpatients, without requiring hospitalisation.

In the meantime, the medical situation in the camp remains very fragile and this outbreak has shown that the PoC is at risk of large outbreaks. As the population of the camp continues to grow, all organisations need to ensure that humanitarian assistance – such as drinkable water, food, primary healthcare and shelter – continues to be available in the camp.

WORLD AIDS DAY

1 December marked World Aids Day around the world. In South Sudan, many people living with HIV are still undiagnosed and not getting treatment for the deadly virus. In Yambio, in Greater Equatoria, MSF has been running a pioneering project that aims to improve access by rural communities to testing for HIV and providing care to those found to be HIV-positive.

The HIV study project in Yambio was launched to see if diagnosing and treating HIV at community-level is an effective way of bringing the treatment closer and faster to patients, especially in areas that are conflict-affected, unstable or lack basic health infrastructure. The programme could be scaled up later in South Sudan as well as replicated in other similar environments in countries with poor access to HIV diagnosis and treatment. Preliminary results are encouraging. In just over a year, more than 10,000 people have been tested for HIV; 414 were found to be HIV-positive and more than 330 were initiated on lifesaving treatment.

MSF is setting up an 'adaptable network' amongst villages around Yambio in case they are cut off during the rainy season or when conflict makes access impossible. If an area becomes inaccessible, a designated community health worker will meet our medical teams and bring back a supply of antiretroviral drugs for patients.

The long-term plan is to make the findings known to other healthcare providers once the test period is complete. In that way, more 'test and treat' projects can start helping isolated communities across Africa.

MSF OPERATIONS IN RESPONSE TO THE MEDICAL NEEDS IN SOUTH SUDAN

GREATER BAHR EL GHAZAL REGION:

Aweil: Limited access to healthcare

Support to Aweil State Hospital

- Maternal care, obstetrics, ante-natal care
- Paediatric and neo-natal ward
- Inpatient therapeutic feeding centre
- Vaccinations
- Minor surgery

Wau: Responding to medical needs following fighting, displaced population

- Paediatric inpatient department
- Inpatient therapeutic feeding programme
- Outreach: four clinics with integrated nutritional services

GREATER EQUATORIA REGION:

Yambio: HIV response, emergency response for displaced populations

Community-based test and treat programme

- Outreach and mobile clinics
- HIV testing and treatment
- Training of community healthcare workers

Yei: Limited access to healthcare

Primary healthcare centre in Yei town

- Response to violence and subsequent displacement of population that occurred from July to September 2016
- Clinic providing general consultations six days a week
- Activities: general consultations, expanded programme on immunisation (EPI), mental health

GREATER UPPER NILE REGION:

Bentiu: Displaced population, limited access to healthcare

MSF hospital inside UN PoC site and operational compound in Bentiu town

In the PoC:

- Secondary healthcare, inpatient department, surgery and emergency room
- Maternal care for complicated obstetrics, and SGBV program
- Inpatient therapeutic feeding centre
- Outreach program within the PoC

In town:

- Clinics six days a week in Bentiu town providing access to primary healthcare
- 24-hour stabilisation unit prior to referral
- Reproductive and SGBV services and referrals

Bor: Technical support to Bor state hospital

- Emergency room, triage, pharmacy management
- Starting support to the surgical department
- Laboratory and waste management

Lankien/Yuai: Remote location, limited access to healthcare, periodic violence and displacement

MSF hospital in Lankien, mobile outreach clinics

- Primary and secondary healthcare, obstetric surgery
- Maternal care, obstetric ward
- Nutrition services (outpatient and inpatient)
- Kala azar, HIV and tuberculosis (TB)
- Primary healthcare clinic in Yuai

South/Central Unity: Displaced and violence-affected population

Decentralised basic healthcare

Basic primary healthcare treating the population's most common morbidities

Maban Doro: Sudanese refugees from Blue Nile and host population

MSF health centre and outpatient health units

- Primary healthcare (general consultations) in Bunj clinic
- Secondary healthcare in Doro clinic: outpatient department, inpatient department, inpatient therapeutic feeding centre, sexual and reproductive health (including maternity for non-complicated deliveries)
- Malaria mobile clinics and mosquito net distribution for the host community during malaria peak season
- Response to emergencies

Malakal: Violence and displacement

Hospital in UN PoC site and Health Clinic in Malakal Town

- Primary healthcare
- Secondary healthcare (inpatient department)
- Inpatient therapeutic feeding centre
- Sexual and reproductive health
- Emergency room and triage
- Kala azar, TB and HIV
- Mental health
- Health and hygiene promotion

Mayom: Limited access to healthcare

Support to Ministry of Health healthcare centre

- Secondary healthcare referrals
- Maternal care
- Outpatient consultations
- Malnutrition programme
- Vaccinations

Melut: Violence and displacement

MSF hospital

- Primary, secondary healthcare, emergency room and triage
- Inpatient therapeutic feeding centre
- Kala azar, TB and HIV
- Health and hygiene promotion

After more than three years working in Denthoma 1 and 2 camps for internally displaced people (IDPs), and in Melut PoC, the project will close in January 2017.

Old and New Fangak: Remote location, limited access to healthcare, periodic conflict and displacement

MSF hospital

- Inpatient and outpatient care, emergency room
- Inpatient therapeutic feeding centre
- Ante-natal care and deliveries
- Assessments of other villages and referrals by boat ambulance

Pibor: Remote location, poor access to healthcare, violence

- Clinic with outpatient and inpatient departments, emergency room, laboratory, sexual and reproductive health (including maternity)
- Outreach activities (primary healthcare clinics with basic activities) in Gumuruk and Lekongole
- Response to medical emergencies
- Lifesaving surgery (starting 2017)

Wau Shilluk: remote location, displaced population

MSF medical

- Primary and secondary healthcare
- Emergency room
- Therapeutic feeding programme
- Health and hygiene promotion
- Kala azar, TB and HIV

Yida: Refugees from Sudan and host population

MSF hospital in a refugee camp

- Primary and secondary healthcare (inpatient department)
- Emergency disease outbreak response and mass vaccinations
- Inpatient therapeutic feeding centre
- Mobile outreach clinic

ABYEI SPECIAL ADMINISTRATIVE AREA:

Agok: Limited access to healthcare

MSF hospital

- Surgery, emergency room
- Maternal care, obstetrics, newborn unit
- Inpatient therapeutic feeding centre
- Vaccinations
- Community-based malaria programme
- Snakebites
- Chronic care clinic including treatment for HIV, TB and diabetes

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IN NEIGHBOURING COUNTRIES

Ethiopia

Gambella region refugee sites

- Primary and secondary healthcare
- Surgery in Gambella hospital
- Mobile outreach clinics
- TB and HIV programmes

Sudan

Refugee camp in White Nile State

- Primary and secondary healthcare
- Nutrition program
- Water and sanitation activities

Uganda

Bidibidi Refugee Complex in Yumbe district, Northern Region

- Primary healthcare
- Nutrition program
- Vaccination activities (EPI)
- Mental health
- Sexual and Gender based violence programme
- Water and sanitation activities

Congo

Refugees in Adi healthzone, Ituri

- Ambulatory nutrition program
- Sexual and reproductive health and family planning
- Vaccination against measles
- Mental health

Médecins Sans Frontières (MSF) employs around 3,000 South Sudanese staff and more than 300 international staff to respond to a wide range of medical emergencies and provide free and high quality healthcare to people in need in 17 project locations across the country.

Médecins Sans Frontières (MSF)/Doctors Without Borders is an international, independent, medical humanitarian organisation that delivers emergency aid to people affected by armed conflict, epidemics, natural disasters and exclusion from healthcare in more than 60 countries around the world. MSF offers assistance to people based on need, irrespective of race, religion, gender or political affiliation. Our actions are guided by medical ethics and the principles of neutrality and impartiality.

MSF has worked in the region that today constitutes the Republic of South Sudan since 1983.