



PROJECT OVERVIEW

Essential Services for IDPs & Returnees (ESIR) II

PROJECT GOAL

To support nine health facilities in three counties of Central Equatoria State, South Sudan in providing essential primary health care, reproductive health services, and gender-based violence (GBV) response and protection services.

South Sudan continues to face complex humanitarian crises resulting from regional and internal conflict, limited health and agriculture resources and extreme weather conditions. In 2021, approximately 8.3 million people in South Sudan were estimated to be in need of humanitarian assistance. Protracted regional conflict and instability have exacerbated the health context as large numbers of returnees and internally displaced persons (IDPs) have settled in South Sudan counties proximal to the DRC and Uganda borders, causing greater resource constraints in host communities.

Funded by USAID's Bureau for Humanitarian Assistance (BHA) and led by Tearfund, the ESIR II project implemented a multisectoral, integrated response to improve access to essential health and nutrition services, food security, protection of women and children, WASH and agriculture food

security services among returnees, IDPs and host populations in Central Equatoria State. In partnership with local actors, IMA World Health operationalized non-functional county health facilities and established mobile outreach teams, providing emergency and essential services through 6 fixed health facilities and 3 mobile health facilities to reach both settled and highly mobile populations. In addition to training staff on COVID-19 prevention and response, outreach work through community health workers raised awareness of health provision, health promotion, social and behavior change, and how to sustainably manage key health infrastructure.



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Furthermore, IMA World Health facilitated a referral network to improve access to specialized care through the provision of transportation to hospitals in South Sudan and Uganda. ESIR II services targeted 43,273 individuals, including 38,178 IDPs, residing in Morobo, Kajo-Keji and Lainya Counties.

Since 2008, IMA World Health has been working with South Sudan's nascent government ministries, international and national partners, and other health organizations to strengthen the health system's capacity to deliver high-quality essential health care services, implement community-based HIV/AIDS prevention interventions, and improve maternal, neonatal and child health outcomes.

RESULTS

- **9 health facilities** supported
- **71,066 patient consultations** conducted
- **57,908 communicable disease consultations** conducted, of which 32,289 were malaria consultations
- **9 community health workers** deployed, trained and supported
- **4,205 women** attended two or more comprehensive antenatal clinics
- **819 births** were assisted by a skilled birth attendant
- **743 newborns** received postnatal care within three days of delivery
- **23 healthcare staff** trained in basic emergency obstetric and newborn care (BEmONC) and quality of care



The Corus Effect

Founded in 1960, IMA World Health is a leading public health organization operating in some of the world's most fragile settings. Through partnerships with change agents at the local and national level, our work centers on four strategic pillars: global health security, health systems strengthening, social and behavior change, and integrated primary health care support and delivery.

IMA World Health is part of Corus International, an ensemble of global leaders in international development and humanitarian assistance. In addition to IMA World Health, the Corus family of organizations includes global non-governmental organization Lutheran World Relief, U.K.-based technology for development company CGA Technologies, impact investing group Ground Up Investing, and direct trade company Farmers Market Brands.

We operate as permanent partners, integrating expertise, disciplines, approaches and resources to overcome global health challenges, develop productive and stable economies, improve resilience in the face of climate change, and respond to natural disasters and humanitarian crises.

