



PROJECT OVERVIEW

JESI | May 2023 - April 2024

JONGLEI STATE INTEGRATED ESSENTIAL SERVICES (HEALTH, WASH AND NUTRITION) FOR INTERNALLY DISPLACED PERSONS (IDPS) AND HOST COMMUNITIES

Funded by USAID's Bureau for Humanitarian Assistance (BHA), IMA World Health (IMA) is providing emergency health services to isolated populations across four counties (Ayod, Nyirol, Fangak, and Pigi) in Jonglei State, South Sudan. Many health facilities in these counties are in a state of disrepair, vandalized, or simply non-functional. Even the operational ones often lack trained staff, proper infection prevention and control (IPC) measures, access to clean water, essential medicines, medical supplies, and equipment. The issue is exacerbated by flooding, which has resulted in more people living in close proximity to stagnant water, leading to a rise in malaria cases in areas where the facilities are ill-equipped to respond. Furthermore, numerous facilities are unable to provide HIV testing and counseling services and have weak immunization programs that are unable to respond to influxes of displaced populations. Protection concerns, particularly for women and girls, remain a pressing issue. Those affected by violence face obstacles in accessing formal justice systems, encounter restrictions on their freedom of movement, and struggle to obtain basic necessities, including food.

The convergence of flooding, ongoing conflict, and instability in South Sudan has led to widespread displacement, both within the country and across its borders. Persistent violence, following failed peace agreements in 2017, has led to severe

PROJECT GOAL

Improve access to essential health services for vulnerable IDPs and host communities in four counties in Jonglei State (Ayod, Nyirol, Fangak, and Pigi).

economic and social consequences, including a significant reduction in the country's health budget and rising inflation. The humanitarian community in South Sudan estimates that 9.4 million people—a staggering 76% of South Sudan's population—will need humanitarian assistance in 2023, an increase of 500,000 people compared to 2022.

JESI PROJECT TARGETS

- Establish four mobile tented health facilities to provide routine outpatient consultation services, each equipped with two gender-sensitive and handicap-accessible latrines.
- Conduct on-site gender-based violence (GBV) screening in all facilities and provide care for survivors.
- Recruit, equip, train, monitor and support four mobile outreach teams of community health workers to extend healthcare coverage to remote communities.
- Train 12 facility staff in essential elements of ANC, safe labor, delivery and newborn care.
- Facilitate the presence of skilled attendants at 118 deliveries.
- Train 18 people in medical commodity supply chain management.
- Screen 16,264 individuals for malnutrition.
- Improve water services for 20,255 individuals.



JESI PROJECT PARTICIPANTS

- **Health:** 41,421 people (24,852 IDPs)
- **Nutrition:** 10,928 children under 5 (6,557 IDPs), 3,392 pregnant and lactating women (2,053 IDPs)
- **WASH:** 20,255 people (12,153 IDPs)

RESULTS TO DATE (MAY - SEPTEMBER 2023)

- **4 mobile health clinics** were established, staffed and operational.
- **12 handwashing stations** were established.
- **33 healthcare staff** were trained.
- **8,802 cases of communicable diseases** were treated, including 2,829 cases of malaria, 1,857 cases of acute respiratory tract infections, 722 cases of diarrhea, and 3,392 cases of other diseases, injuries or infections (such as ear infections, eye infections, wounds, and trauma).
- **7,813 individuals** were vaccinated by the IMA mobile clinic team. (BCG - 87 children, OPV - 183 children, Penta - 109 children, Tetanus - 87 pregnant women and 82 non-pregnant women, Measles - 7,265 children)
- **17 women** were assisted by skilled midwives during delivery, and all of them received postnatal care services.
- **3,602 children** between the ages of 6 and 59 months underwent screening for malnutrition, with 238 children referred for advanced care.
- **3,922 pregnant and lactating women** were screened for malnutrition, with 226 referred for advanced care.
- **721 households (5,556 individuals)** were reached with hygiene promotion activities and messaging.

The Corus Effect

IMA World Health leads global health programming at Corus International, an organization that unites an array of world-class nonprofits and businesses, each with specialized expertise. Our reach and capabilities are amplified by the other global leaders in our Corus International family, including Lutheran World Relief, CGA Technologies and Ground Up Investing. Our traditional and nontraditional approaches bring together the multi-dimensional, holistic solutions needed to truly achieve lasting change.

IMA IN SOUTH SUDAN

Since 2008, IMA has collaborated 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. Despite the onset of violent conflict in 2013, IMA continued its work with local government and primary health care providers throughout Upper Nile and Jonglei states, ensuring service delivery and emergency response, in its continued support of hundreds of thousands of people across South Sudan.



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