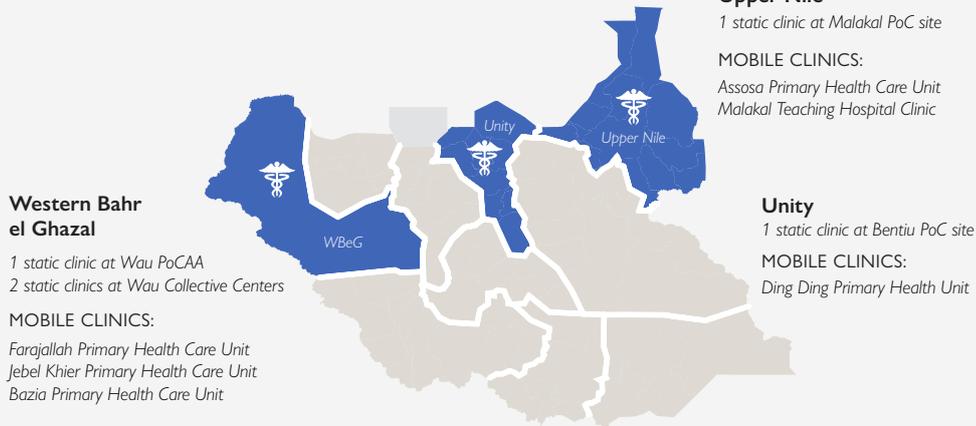




MHU Accomplishments

The IOM Migration Health Unit (MHU) provided life-saving medical care and emergency response via seven static clinics and six mobile clinics in the states of Western Bahr el Ghazal, Upper Nile, and Unity. HIV and AIDS prevention activities were conducted in 18 sites across the ten states of South Sudan.

MHU Mobile & Static Clinics



- From 17 to 29 July 2018, the IOM Rapid Response Team (RRT) successfully conducted the first round of a preventative oral cholera vaccination (OCV) campaign in Yirol East and West counties, Lakes State, reaching 156,682 individuals with RRT.
- From 29 August to 4 September 2018, IOM RRT successfully conducted a combined measles and oral polio vaccination campaign in Bentiu Protection of Civilians (PoC) site, reaching vaccinating 38,638 adult and 46,932 children
- Since September 2018, IOM has been actively involved in Ebola Virus Disease (EVD) preparedness activities. With support from USAID, the IOM MHU in collaboration with IOM Water, Sanitation, and Hygiene (WASH) and Data Tracking Matrix (DTM) teams have achieved the following:
 - Established three point of entry (PoE) screening sites at Yei Airport, Kaya border points, and Yei RRC point of control in Yei River State;
 - Undertaken an on-the-ground assessment to identify up to eight (8) PoE screening locations.

MHU Q3 HIGHLIGHTS

56,151

consultations provided in 7 IOM static clinics in PoC sites and collective centres

17,356

children under 5 years provided with nutritional screenings

309

births attended by skilled birth attendants

40,299

consultations provided by MHU mobile clinics and Rapid Response Teams

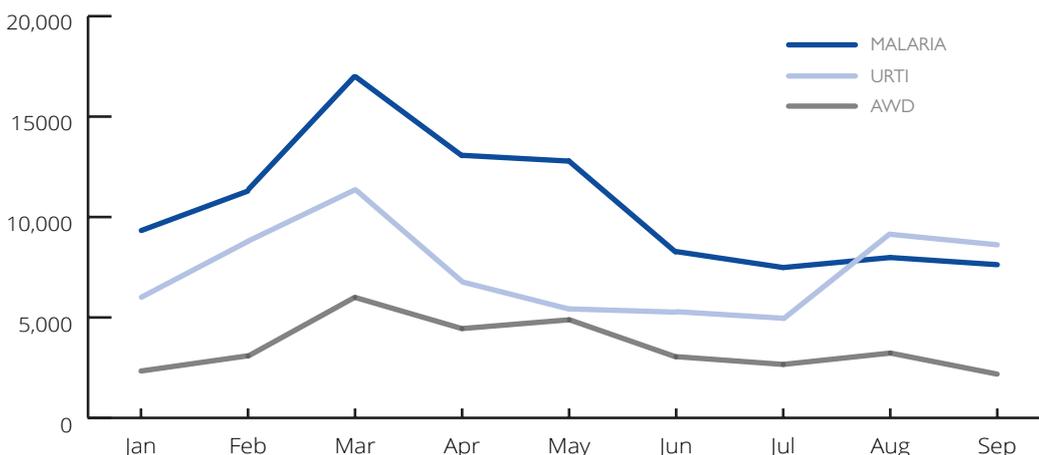
3,124

children under 5 years receiving measles vaccinations in emergency or returnee settings and mass campaigns

156,682

individuals reached with oral cholera vaccination

Top Morbidities at IOM Clinics in 2018



TOP MORBIDITIES IN Q3 (BY NUMBER OF CASES)

23,059

upper respiratory tract infections

22,680

malaria

8,077

acute watery diarrhea

HIV and AIDS Interventions

MHU continued its HIV and AIDS programme among key populations including female sex workers (FSWs) and their clients, and vulnerable populations (IDPs) in PoC sites and their host communities. MHU also supports the Right-to-Health campaign through the UNAIDS Unified Budget, Results, and Accountability Framework (UBRAF) funding. IOM kicked off the implementation of the campaign in Jonglei state on 26 September 2018. The intervention includes HIV/AIDS awareness, sensitization, and testing and referral for treatment among uniformed forces, as well as their families and communities living near military barracks.



An SPLA peer counsellor testing a fellow military during the Right-to-Health campaign in Bor. © IOM/ Headon 2018

Implementing comprehensive HIV/AIDS services in Malakal PoC

Aban Nyawelo* is a volunteer working at the IOM Primary Health Care Unit (PHCU) in the Malakal PoC. He was one of the first clients who underwent HIV voluntary counseling and testing (VCT) at the IOM Malakal PoC Clinic. He appreciates having undergone an HIV test declaring that: "I am happy and relieved after going through the test. Before the test, I used to fear. Now I am able to live healthy and I am grateful that services are now available to the community." He promotes the VCT services and this has led to staff themselves seeking the HIV services.

Since the third quarter of last year (2017), IOM has been providing comprehensive HIV and AIDS services in PoC sites in Bentiu, Malakal, and Wau. Just this year, around 4,200 have been tested through HIV VCT and prevention of mother-to-child transmission (PMTCT) services. Health and hygiene promoters conduct weekly awareness raising to increase HIV services uptake. Aban says "People fear testing but providing the right information is the best way to promote healthy living."

*name changed

Bringing Reproductive Health Services to Ding Ding in Rubkona

Nyajal Gatluak* is a 29-year-old mother of four from Juach Village, Rubkona County. During her antenatal care (ANC) visits to The IOM Ding Ding Clinic, she was identified as a high-risk mother with inimical obstetric history, having lost three consecutive pregnancies at home. Due to frequent conflicts and insecurity in the area, agencies providing reproductive health services were not available, hence, Nyajal could not determine the cause of her frequent miscarriages. When the IOM-supported Ding Ding health facility was opened, she attended more than four ANC visits as advised by the health workers. During her ANC visits, underlying medical conditions were effectively treated and monitored throughout her pregnancy.

In July 2018, Nyajal delivered a healthy baby girl at the Ding Ding health facility with the assistance of a skilled birth attendant. She compared the experience with previous home deliveries and she said, "I'm the first to give birth at the health facility in my extended family. We thank God for bringing IOM to help us. Many babies delivered at home had severe eye infections and discharge from the umbilical stump. Now my baby is eight weeks old without any life threatening illness. I'm grateful to the midwives for their support."

Nyajal has been actively bringing her baby to receive routine immunizations provided by IOM at the health facility. She also joined the mother-to-mother breast-feeding support group formed in the community to teach and encourage mothers on exclusive breast-feeding. IOM continues to support the Ding Ding health facility with primary health care services as well as reproductive health services in order to improve maternal, neonatal and infant health and well-being.

*name changed



Newborn baby getting a check-up at IOM Clinic. © IOM/Mclaughlin 2018