

WHO'S AREAS OF FOCUS IN SOUTH SUDAN 2016/17

WHO IN SOUTH SUDAN

The World Health Organization provides leadership on critical health issues and technical support to the Ministry of Health of South Sudan and partners to achieve the overarching goal of promoting and protecting the health status of the people of South Sudan, as outlined in the 12th General Program of Work (GPW).

In 2016, WHO Country Office in South Sudan underwent an accelerated reform, using the WHO Transformation Agenda in the African Region as the guiding vision. The reform led to an enhanced country office capacity in terms of human resources, technical expertise and development of pro-results values. The Transformation Agenda of WHO focuses on pro-result values, smart technical focus, effective communications and partnerships and responsive strategic operations.



WHO Emergency Mobile Medical team coordinator, administering Oral Cholera Vaccine in Kapoeta town

WHERE WE WORK



Currently, WHO maintains its presence in 140 payams through its field assistants; in 80 counties through its county supervisors and in all of the 10 former states through its field hubs coordinating the health response at state level and providing supervisory support to the counties and payams. At national level, WHO hosts the Health Cluster Coordination, and Experts and Technical Officers of all critical program areas.

WHAT WE DO: Our areas of focus;

1. Surveillance, health risk assessment and health services information
2. Preparedness and response to outbreaks and health emergencies including coordination
3. Support building of health system foundations
4. Maintaining polio free status and achieve polio certification
5. Focused technical support, policy options, trends monitoring and gap filling in service delivery areas

See details overleaf

1 SURVEILLANCE, HEALTH RISK ASSESSMENT AND HEALTH SERVICES

INFORMATION:

- **Mapping available health services:** WHO is launching a system to routinely track health services available and gaps at key health facilities across the country. This will help inform and drive partners to fill identified gaps.
- **Rapidly identifying outbreaks and initiating response:** WHO is currently rolling out a mobile-based disease surveillance system, EWARS that will facilitate the timely reporting of diseases of epidemic potential at the health facility-level. This will trigger rapid outbreak investigation and response, including coordination and collaborating with implementing health partners.
- **Monitoring violence against healthcare:** WHO will introduce a mechanism to detect and report instances of violence against healthcare throughout South Sudan to facilitate response and advocacy in affected areas.
- **Improving strategic health information for better planning and preparedness:** WHO will strengthen its data system architecture to enable analysis across data sources and create disease prediction models and other tools to enhance planning, preparedness, and response e.g. by combining and analyzing rainfall, flooding, and malaria databases together a model for early warning of seasonal malaria epidemics could be created.

3 SUPPORT BUILDING OF HEALTH SYSTEM FOUNDATIONS:

- WHO in collaboration with MOH and partners in South Sudan made significant progress in development and implementation of National Policies, Strategies and Plans initiated the process to develop the first National Health Accounts developed, a benchmarking and road map for supply chain management plan and initiated a process to develop HRH national health workforce accounts.
- Policy dialogue conducted at national and subnational levels to build consensus and traction towards attainment of Universal Health Coverage and SDGs. The 3rd national health summit was conducted on 2017 with WHO support.
- Focused support to priority health infrastructure (6 Maternity Complexes)
- Training of specialists (Gynecologists etc.)

4 MANTAINING POLIO FREE STATUS AND ACHIEVE POLIO CERTIFICATION:

WHO continues to support South Sudan to remain polio-free and to achieve Polio certification status through Supplementary immunization and surveillance.

- Two national Polio Immunization campaigns conducted in 2017 reaching over 3 million children.
- GPEI ramp down simulation exercise was held to document best practices and transition processes.
- Environmental surveillance for polio introduced.

2 PREPAREDNESS AND RESPONSE TO OUTBREAKS AND HEALTH

EMERGENCIES INCLUDING COORDINATION:

- Deployment of Rapid Response Teams (RRTS) and Emergency Mobile Medical Teams (EMMTs) during emergencies. In 2017, 15 RRTs and 5 EMMTs deployed.
- Investigation, confirmation and response to outbreaks: In 2017, about 20 000 cases of cholera with 355 deaths (CFR 1.8%) and about 1000 cases on measles with 24 deaths.
- WHO supports reactive immunization during outbreaks of measles, cholera, meningitis. Over 1.5 million doses of Oral cholera vaccination utilized in 2017.
- Maintenance of emergency medicines core pipeline; repositioning and deployment of emergency drug kits. Over 2 000 IEHKs, DDKs and SAM kits deployed.
- As a Health lead agency, WHO supports health cluster coordination both at national and state levels.
- To strengthen response activities WHO is setting up Public Health Emergency Operations center (PHEOC) at national level and will cascade it to state hubs.

5 FOCUSED TECHNICAL SUPPORT, POLICY OPTIONS, TRENDS MONITORING AND GAP FILLING IN SERVICE DELIVERY AREAS:

- **Maternal and Reproductive Health:** Support Emergency Obstetric and Neonatal Care (EmONC). 1548 health workers trained on Comprehensive Emergency /Basic Emergency Obstetric and Neonatal Care (CE/BEmONC), maternal death surveillance and response (MDSR) and sexual and gender-based violence (SGBV).
- **Immunization:** Support routine Immunization and introduction of new vaccines. Penta 3 coverage increased from 44% in Jan to 58% in April 2017.
- **Communicable disease control:** Antiretroviral Therapy (ART) facilities increased from 19 (2014) to 50 (2017) TB treatment success rate reached 80%, Zero cases of Guinea Worm reported in 2017 compared to 6 in 2016.
- **Non-communicable diseases and mental health:** Support non-communicable diseases (NCD) risk factors reduction and case management. Advocacy for framework convention on tobacco control (FCTC) resulting in increased excise taxes for alcohol and tobacco products from 200% to 300% and 200% to 250% respectively.
- **Nutrition:** Support SAM and medical complication and nutritional surveillance. Distributed 50 Severe Acute Malnutrition (SAM) kits, treating 2500 children in 29 counties.
- **Water and sanitation hygiene:** Support water quality control, Water and sanitation Hygiene (WASH) in health facilities and medical waste management and infection prevention and control. 24 National Public Health Officers including WASH Cluster partners trained on water quality control, testing, treatment and monitoring. Provided 50 pieces of chlorination and 19 mobile water analysis testing kits.

We acknowledge the generous contributions and support from our donors.

For more information, visit <http://www.afro.who.int/en/ssd/news.html>, <http://who.int/emergencies/south-sudan/> <http://www.southsudanhealthcluster.info>