



Treatment and Prevention of Acute Malnutrition in Jonglei & Greater Pibor Administrative Area, Republic of South Sudan

Date: January 31, 2018	Prepared by: Dr. Taban Martin Vitale																
I. Demographic Information																	
1. City & State: Bor, Jonglei State, and Greater Pibor Administrative Area, Republic of South Sudan																	
2. Organization: Real Medicine Foundation, South Sudan (www.realmedicinefoundation.org) United Nations Children's Fund (www.unicef.org)																	
3. Project Title: Treatment and Prevention of Acute Malnutrition																	
4. Reporting Period: October 1, 2017 – December 31, 2017																	
5. Project Location (region & city/town/village): Ayod County of Jonglei State and Boma County of Greater Pibor Administrative Area																	
6. Target Population: Direct project beneficiaries for the year 2017 tabulated below: Table 1: SAM children directly targeted																	
<table border="1"> <thead> <tr> <th>County</th> <th>SAM Children to Benefit from OTP</th> <th>SAM Children to Benefit from SC</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Ayod</td> <td>2,944</td> <td>440</td> <td>3,384</td> </tr> <tr> <td>Boma</td> <td>1,469</td> <td>0</td> <td>1,469</td> </tr> <tr> <td>Total</td> <td>4,413</td> <td>440</td> <td>4,853</td> </tr> </tbody> </table>		County	SAM Children to Benefit from OTP	SAM Children to Benefit from SC	Total	Ayod	2,944	440	3,384	Boma	1,469	0	1,469	Total	4,413	440	4,853
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Table 2: MAM children and pregnant and lactating women (PLW) directly targeted																	
<table border="1"> <thead> <tr> <th>County</th> <th>MAM Children to Benefit from TSFP</th> <th>PLW to Benefit from TSFP</th> </tr> </thead> <tbody> <tr> <td>Ayod</td> <td>4,329</td> <td>3,375</td> </tr> <tr> <td>Boma</td> <td>1,898</td> <td>1,467</td> </tr> <tr> <td>Total</td> <td>6,227</td> <td>4,842</td> </tr> </tbody> </table>		County	MAM Children to Benefit from TSFP	PLW to Benefit from TSFP	Ayod	4,329	3,375	Boma	1,898	1,467	Total	6,227	4,842				
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Direct project beneficiaries are approximately 140,517 people living in the payams assigned to RMF, and indirect beneficiaries include the whole population of the two counties, estimated to be 340,661 projected from the 2008 South Sudan Population and Housing Census. The nutrition service centers also receive beneficiaries from neighboring counties and internally displaced persons (IDPs) from various areas of Jonglei and neighboring states.																	
II. Project Information																	
7. Project Goals: The overall goal of this project is to reduce the global acute malnutrition (GAM) rate to an acceptable level of less than 15% in each of the payams assigned to RMF. This will be in line with standards set by the South Sudan National Nutrition Program.																	
8. Project Objectives: <ul style="list-style-type: none"> To provide lifesaving nutrition services for acutely malnourished children (boys and girls) under 5 years of age and pregnant and lactating women (PLW). 																	

- To prevent malnutrition in early childhood through promotion of improved infant and young child feeding, caregiving, and care seeking practices at the facility, community, and family level.
- To prevent and treat micronutrient deficiency disorders in children through provision of multiple micronutrient supplementation, vitamin A, and deworming campaigns in the assigned areas.
- To strengthen the capacity of the County Health Department (CHD) and provide appropriate resources for the initiation and integration of nutrition services into existing primary health care, as well as linking nutrition interventions in the health system in the targeted counties.

9. Summary of RMF-sponsored activities carried out during the reporting period under each project objective (note any changes from original plans):

Implemented activities in line with RMF-sponsored activities and project objectives:

- In collaboration with Action Against Hunger (ACF), RMF reestablished the Mogok CMAM center, which provides complete CMAM packages to the community in Mogok and neighboring areas.
- Recruited and trained a new nutrition team (both technical and support staff) and deployed them to Mogok following reestablishment of the site.
- Facilitated the maintenance of our CMAM sites in Ayod and Boma throughout the reporting quarter.
- Supported the operations of all nutrition centers in Ayod and Boma.
- Facilitated the participation of RMF in the joint rapid response mechanism mission conducted by WFP and UNICEF in Ayod County during the reporting quarter.
- Procured and provided adequate stationery for the OTP/SC/TSFP sites in Ayod and Boma.
- Continued to support the satellite phone services through payment of monthly subscription fees, as this is the only means of communication in those hard to reach areas where RMF works and where routine phone services are not available.
- Procured and delivered an adequate amount of essential foodstuffs for RMF's relocated staff members (those recruited from Juba and deployed to Ayod and Boma) where basic commodities are not available.
- Supported the welfare of relocated nutrition staff members in Ayod and Boma.
- Procured and provided in-kind support (soaps, salt, and sitting mats) for the infant and young child feeding (IYCF) mother-to-mother support groups.
- Facilitated in-country travel of nutrition staff between Juba and different nutrition centers in Ayod and Boma with UNHAS flights.
- Coordinated and delivered adequate nutrition supplies to RMF sites in Ayod and Boma through the logistics cluster and regular UNHAS flights.
- Facilitated the process of validating the Ayod nutrition SMART survey conducted in the previous quarter.
- Continued support of high-speed Wi-Fi internet service in the Juba office and in Jiech and Boma to enable easy communication and coordination.
- Continued facilitation of RMF's team to participate in all coordination activities/meetings at national and state levels.

10. Results and/or accomplishments achieved during this reporting period:

- The Ayod nutrition SMART survey results were validated by the Nutrition Information Working Group, and the final report is being circulated and used for decision-making.
- The Mogok CMAM site was restored and is providing OTP, SC, TSFP, and community outreach services.
- **4 existing OTPs, 4 TSFPs, 1 SC, and the reestablished OTP/TSFP/SC** site in Mogok were maintained and remained operational throughout the quarter, all providing quality CMAM and IYCF services in Ayod County.
- **3 existing OTPs/TSFPs** in Boma were maintained and continued providing quality CMAM and IYCF services during the reporting quarter.
- **8,402 and 5,262 children under 5** were screened for signs of acute malnutrition during the fourth quarter in Ayod and Boma counties, respectively.
- **350 and 191 severely acute malnourished (SAM) children** were identified and referred to OTPs in Ayod and Boma, respectively, for therapeutic management during this reporting quarter.
- **32 SAM children with medical complications** were referred to the RMF SC in Ayod, where they received treatment.

- **665** and **287 moderately acute malnourished (MAM) children** in Ayod and Boma counties, respectively, were enrolled in a supplementary feeding program during this quarter.
- **4,931** and **3,080 pregnant and lactating women (PLW)** were screened for signs of acute malnutrition in Ayod and Boma counties, respectively.
- **444** and **195 pregnant and lactating women** were enrolled in a supplementary feeding program in Ayod and Boma counties, respectively, during the reporting quarter.
- **2,766** and **2,067 mothers and caregivers** in Ayod and Boma, respectively, received appropriate messages on IYCF, strengthening malnutrition prevention measures.
- **9** and **6 IYCF mother-to-mother support groups** in Ayod and Boma, respectively, were supported and continued to deliver IYCF services.
- RMF participated in the joint rapid response mechanism mission conducted in Ayod by UNICEF/WFP, during which our nutrition staff members were mentored and a number of SAM/MAM children and PLW were enrolled in the feeding program.

The treatment outcomes at the end of the reporting quarter (Q4) are summarized in the tables below:

Table 3: Treatment outcome for SAM

S/N	SPHERE Indicator	Ayod	Boma
1	Recovery Rate	85%	88%
2	Defaulter Rate	10%	12%
3	Mortality Rate	4%	0%
4	Non-respondent	1%	0%

Table 4: Treatment outcome at TSFPs

S/N	SPHERE Indicator	Ayod	Boma
1	Recovery rate	91%	94%
2	Defaulter rate	9%	5%
3	Mortality rate	0%	0%
4	Non-respondent	0%	1%

- RMF's relocated staff in various nutrition treatment centers of Ayod and Boma received adequate essential foodstuffs from Juba and continued to provide quality CMAM and IYCF services. (All our areas of intervention are hard to reach, and purchasing basic foodstuffs there is not possible.)
- Our nutrition field-based teams continued to have clean, safe drinking water through usage of the provided water purifying equipment.
- Existing nutrition staff members were supported, mentored, and refreshed on CMAM/IYCF through continued on-site supervision conducted by the nutrition program managers.
- RMF's Juba-based team, visiting nutrition staff from the various field locations, and JTH staff continued benefiting from the high-speed Wi-Fi internet service installed in RMF's Juba office.
- RMF's field teams in Jiech and Boma continued to benefit from the internet service provided in coordination with CMD and VSF, which have a mutual agreement with RMF for the service.
- Monthly payment of Thuraya (satellite phone) subscription fees enabled effective communication and coordination.
- Continued replenishment of nutrition supplies in all our CMAM sites through the logistics cluster and regular UNHAS operated aircrafts.
- Coordinated RMF nutrition activities with UNICEF, UN agencies, the nutrition cluster, and other nutrition partners, both at the national and state levels.

11. Impact this project has on the community (who is benefiting and how):

- The communities in Boma and Ayod in particular continue to benefit from our services. During the reporting quarter, a total of **541 SAM** and **952 MAM children**, as well as **639 PLW** were enrolled in our feeding program, hence improving quality of life of children and pregnant and lactating women.
- The populations in our catchment areas are benefiting from regular educational information on nutrition, health, and sanitation.

- Through continuous nutrition education and IYCF messages, communities in these areas are now learning about appropriate feeding behaviors and valuable local food sources that they were previously unaware of; communities are no longer solely dependent on the traditional food sources of milk, meat, and sorghum.
- The capacity of the County Health Departments (CDHs) and the staff recruited from Ayod and Boma is continuously built through training and mentorship.
- The limited resources of the State Ministry of Health and County Health Departments of the selected counties are now channeled to cover other areas, since RMF is providing nutrition services in the whole area.
- The nutrition project offers employment opportunities for South Sudanese nationals at national, state, county, and village levels.
- The high-speed Wi-Fi internet access enables easy coordination for RMF's teams based in Juba, Jiech, and Boma, as well as visiting nutrition teams from various field locations.

12. Number served/number of direct project beneficiaries:

- Direct project beneficiaries are approximately 140,517 people living in the payams assigned to RMF, projected from the 2008 South Sudan Population and Housing Census.
- The project aims to provide treatment to about **3,384** and **1,469 SAM children** in Ayod and Boma, respectively.
- The project aims to provide treatment and multi-micronutrients to about **4,329** and **1,898 MAM children** in Ayod and Boma, respectively.
- The project aims to provide treatment and multi-micronutrients to about **3,375** and **1,467 PLW** in Ayod and Boma, respectively.

13. Number of indirect project beneficiaries (geographic coverage):

- The project indirectly targets the whole population of the two counties, estimated to be **340,661**, projected from the 2008 South Sudan Population and Housing Census.
- The **1,721,036** people living in Jonglei State and Greater Pibor also benefit from the project indirectly, as there is frequent movement of people across counties.
- The nutrition service centers also receive beneficiaries from neighboring counties, as well as internally displaced persons (IDPs) from various areas of Jonglei State and other states in South Sudan.

14. If applicable, please list the medical services provided:

RMF's stabilization center (SC) in Ayod provides a range of medical services for children suffering from acute malnutrition with medical complications. All of our outpatient therapeutic program (OTP) sites screen acutely malnourished children for malaria and provide appropriate treatment based on the South Sudan Ministry of Health's policies.

During this reporting period, RMF South Sudan has also been implementing PHCC and BeMONC services in Pibor of Pibor County. But our teams are all working to find ways of extending our health service package to more parts of South Sudan (not only in the hard to reach areas of Pibor County).

15. Please list the most common health problems treated through this project.

This project mainly targets the management of severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) in children under 5 and pregnant and lactating women (PLW). However, some of the children and adults come to our units due to health-related problems, since there are no healthcare services in most of our areas of operation.

- Malaria
- Respiratory Tract Infections
- Urinary Tract Infections
- Diarrheal Diseases
- Intestinal Worm Infestation

- Skin Infections
- Gunshot Wounds
- Enteric Fever
- Sexually Transmitted Infections

16. Notable project challenges and obstacles:

- The slow, bureaucratic financial management system of WFP regularly delays the disbursement of funds, making continuity of services very challenging.
- Delays in fund disbursement from UNICEF affected normal operations of the nutrition program, both at Juba and field levels.
- Continued episodes of stock-out at both the OTP/SCs and TSFPs due to logistics challenges and high patient demand.
- Continued population displacement due to the unstable security situation in Ayod County and some parts of Pibor affected routine operations of nutrition services.
- Lack of a stabilization center (SC) in the Jebel Boma area of Pibor posed a significant challenge in handling identified SAM children who need inpatient care for proper management.
- Irregular UNHAS flights to our areas of operation make it challenging to deliver essential items for the nutrition teams, conduct routine M&E activities, and access financial documents from the field sites to share with RMF headquarters.
- Record inflation of South Sudanese Pounds (SSPs) has made it difficult to provide sufficient staff housing and procure program materials, since the prices of basic commodities have increased more than tenfold. The nutrition budget approved at the onset of the project is now inadequate to perform the planned activities.
- Lack of healthcare services in most parts of Ayod and Pibor makes it very challenging to help patients of all age groups who come to our clinics with medical conditions. The lack of healthcare services in our areas of operation also contributes to malnutrition rates and unfavorable treatment outcomes.
- Delays in approving the in-country quarterly activity plan (implementation plan) negatively affected the processes aimed at achieving the desired deliverables.

17. If applicable, plans for next reporting period:

- Follow up on the renewal of RMF's nutrition PCA and FLA with UNICEF and WFP, respectively, for continuity of services.
- Position nutrition supplies and materials in our sites during the dry season to prepare for the rainy season.
- Lobby for more financial resources to cover the gaps, since operational costs have become very high due to the depreciation of South Sudanese currency and the country's economic crisis.
- Follow up with IMA World Health on the establishment of an SC in Jiech.
- Attend all relevant health-related cluster meetings, particularly nutrition, health, and WASH, in order to create strong connections and access more funding through different clusters.

18. If applicable, summary of RMF-sponsored medical supply distribution and use:

RMF procures basic medical supplies to take into our areas of operation.

19. Success story(s) highlighting project impact:

Please review Project Photos.

III. Financial Information

20. Detailed summary of expenditures within each budget category as presented in your funded proposal (file attachment is fine). Please note any changes from plans.

Detailed financial report sent separately on a monthly basis.

Project Photos



Essential foodstuffs procured in Juba to be shipped to RMF CMAM sites in Ayod and Pibor for the nutrition staff



Basic items for the CMAM sites and IYCF mother-to-mother support groups



Basic furniture and solar panels procured for the CMAM sites



RMF staff screening PLW for signs of acute malnutrition



RMF nutrition staff conducting health/nutrition education with more focus on IYCF



RMF nutrition staff enrolling beneficiaries in the program



RMF nutrition staff enrolling beneficiaries in the program



Beneficiaries receiving health/nutrition education



RMF nutrition staff organizing beneficiaries to receive nutrition supplies after health/nutrition education



RMF nutrition staff weighing a child during an assessment of under-5 children for signs of acute malnutrition



RMF Nutrition Nurse Lona building rapport with a child before assessing for signs of acute malnutrition



Lona weighing the child. After building rapport, the child was calm during the assessment.



Lona taking a child's MUAC; the results point to SAM.



Measuring the height of a child during nutrition assessment



RMF nutrition staff performing data entry on a TSFP day



RMF compound in Pagil, constructed with local materials