



# HEALTH BULLETIN

## UNDP SOUTH SUDAN



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Officials from the Global Fund Country Team, Ministry of Health, UNDP and partners during the recent Global Fund mission to South Sudan.

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# About Us

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The United Nations Development Programme (UNDP) is the leading United Nations organization fighting to end the injustices of poverty, inequality and climate change. Working with a broad network of experts and partners in 170 countries, we help nations to build integrated and lasting solutions for people and planet earth.

UNDP is the interim Principal Recipient for the Global Fund to Fight AIDS, Tuberculosis and Malaria grants for HIV, TB and Resilient and Sustainable Systems for Health to South Sudan. UNDP works in partnership with the Government of the Republic South Sudan, through the Ministry of Health and the South Sudan AIDS Commission, to end HIV and TB as public health threats by 2030 and to build resilient and sustainable health and community systems for the health and well-being of the people of South Sudan. Since 2020, UNDP has also been the interim Principal Recipient for Global Fund's support for pandemic preparedness and response in South Sudan through the COVID-19 Response Mechanism.

Through the procurement and distribution of medicines, health supplies, laboratory reagents and other necessities, UNDP and its partners ensure the provision of HIV and TB services in over 200 hospitals and health facilities across the country.

Between 2004 and 2010, UNDP also managed the malaria grant and implemented bold malaria reduction targets, protected populations at risk and strengthened the management and coordination capacity of the malaria program in the country.

***The UNDP HIV and Health Strategy 2022-2025: Connecting the dots - Towards a more equitable, healthier, and sustainable future*** elaborates our work on HIV and health, and is guided by the 2030 Agenda for Sustainable Development, the UNDP Strategic Plan 2022–2025 and related regional programmes. It is informed by and complements the strategies and plans of key partners such as WHO, UNAIDS, the Global Fund to Fight AIDS, TB and Malaria, UNICEF and UN Women as well as the Global Action Plan for Healthy Lives and Well-Being.

**[www.undp.org/southsudan](http://www.undp.org/southsudan)**

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# WORKING WITH COMMUNITY GROUPS, We Drive Progress in HIV Response in South Sudan

Since 1988, people around the globe have stood together every 01 December to observe World AIDS Day. We do this to show solidarity and support for people living with and affected by HIV and AIDS, and to remember those who lost their lives through complications resulting from AIDS.

As a way to mobilise more collective action on HIV, in 2015 our global community set ending AIDS as a public health threat by 2030 as an important part of the Sustainable Development Goals (SDGs). This year's World AIDS Day happens with just seven years remaining to achieve this commitment. At this time, we must ask ourselves not if we will fulfil it but how, as we have no other option.

While in recent years progress has been made in global health, expanding access to HIV treatment which has cut global AIDS-related deaths by 52 per cent since 2010, a lot more remains to be done.

Globally, 39 million people are living with HIV and AIDS, out of which only 29.8 million are receiving the life-saving anti-retroviral therapy (ART). The greatest gaps remain here in Africa. In 2022 alone, 1.3 million people contracted HIV worldwide, compared to 1.5 million in 2021. The 2022 new infections include 210,000 adolescent girls and young women – aged 15–24 years – and 4,000 adolescent girls and young women who acquired HIV every week in Africa! A total of 630,000 persons, of which 84,000 are children, died of AIDS-related illnesses in 2022.

In South Sudan, an estimated 160,000 persons are living with HIV (PLHIV), and 62,629 people are currently receiving HIV treatment with a prevalence rate of 1.9% in 2022, down from 2.3% in 2020 and 2.6% in 2021). By December 2022, it was estimated that 39% of all PLHIV knew their HIV status and that 32% were enrolled on ART.

On a positive note, new HIV infections decreased to 11,00 in 2022 from 17,000 in 2021. The annual rate of AIDS-related deaths also slightly decreased from 8,000 in 2021 to 7,600 in 2022. This year's World AIDS Day is an opportunity for a paradigm shift to elevate the response to HIV and AIDS to the scale and speed required, involve everyone that matters in the response especially community actors and PLHIV, as expressed in the theme for the 2023 World AIDS Day.



*By Samuel G. Doe, PhD  
UNDP Resident Representative*

UNDP, in partnership with the Government, with funding from the Global Fund, supports national efforts to end HIV and TB, build resilient and sustainable health systems, strengthen preparedness and response to pandemics and public health emergencies. Through the procurement, storage and distribution of HIV, TB, COVID-19 medicines and laboratory reagents, we ensure access to HIV and TB services in over 200 hospitals and health facilities across the country.

## **“Nothing about us without us”**

One of the main cornerstones of our success in the HIV response is our close collaboration with organizations

of communities living with, at risk of, or affected by HIV such as the National Empowerment of Positive Women United (NEPWU), and South Sudan Network of People Living with HIV (SSNeP+). These are involved in grant writing and programme design and execution, bringing the maxim – nothing about us without us – to life.

These groups have been instrumental in fostering positive living, mobilizing for the uptake of HIV treatment and prevention services, including HIV counselling and testing, HIV screening for pregnant mothers, supporting PLHIV to stay on treatment and monitor the quality-of-service delivery. Under the auspices of NEPWU and SSNeP+, community groups such as mentor fathers and mothers, and community counsellors have promoted treatment adherence, provided continuous follow-up and psychosocial support to women enrolled for prevention of mother-to-child transmission which has helped them have HIV-free babies. Owing to the self-disclosure promoted by community groups, getting positive HIV results is now received with hope for positive living, and not fear. Most importantly, community groups, have undertaken targeted outreach to key populations such as sex workers, truck drivers and boda-boda riders. Working with community groups is also cost-effective and has the added value of building local expertise and sustainability.

For communities to truly lead the response, they need support to overcome financial deficits, policy and regulatory hurdles and capacity constraints. More effort is also needed to boost their capacity in financial, programmatic and operational management, advocacy and resource mobilization. Positioning community-led organizations to lead will add greater impetus to the HIV response towards ending AIDS by 2030.



# LEADERS OF PLHIV WELCOME WORLD AIDS DAY THEME AS EMPOWERING



NEPWU's Evelyn Letio and SSNeP+'s Lole Laila Lole during a recent UNDP, MoH and Global Fund Country Team's mission stakeholder engagement

The theme for the 2023 World AIDS Day – **Let Communities Lead**, underscores the need for organisations of communities living with, at risk of, or affected by HIV to be at the frontline of progress in the HIV response. It is a call to action to support communities in their leadership roles. We spoke to two leaders in South Sudan working in close collaboration with UNDP. Here are excerpts;



**Evelyn Letio Unzi Boki**  
Program Coordinator, National Empowerment  
of Positive Women United (NEPWU)

NEPWU is a women-led organization founded by women and girls, living with and affected by HIV/AIDS. The theme for this year's World AIDS Day is the best since we started commemorating the day and I hope that it can be maintained in the coming years. It is the best to us because it gives us power. It empowers us; it encourages us to even do more.

Community leadership and engagement is very key to the HIV response. Communities give HIV a face so that many who still fear also come out, get tested and enroll on treatment.

The communities support each other and work on a voluntary basis which other people cannot. For instance, at NEPWU, we have mentor mothers and fathers and community outreach volunteers supporting and caring for the bedridden in their communities.



We have, without even gloves, washed wounds of those who are bedridden; the little we have, we share, and we became a family. They have helped people stigmatized and discriminated against by family members and friends, and encouraged people who test positive to enroll for and adhere to treatment.

### The challenges

South Sudan doesn't have a national HIV policy yet there are many issues of discrimination, divorce, GBV and SGBV related to HIV, which it could address. Stigma and discrimination are rampant and, to make it worse, programmes are drifting away from general awareness to

targeted awareness focusing on the most at-risk groups. Persons living with HIV have very unique abilities, including powerful testimonies that can inspire others to accept their HIV-positive status, start medication and live positively.

### Increasing government funding

The Government has left persons living with HIV in the hands of the donors! If the donors leave tomorrow, our hospitals will have no medicine. I urge our government to take care of its people by investing in health.



**Lole Laila Lole**  
Executive Director, South Sudan Network of  
People Living with HIV (SSNeP+)

“ As a result of these interventions, people are living healthy, long and happy lives. Some are living positively for 30 to 40 years! This is because they know the disease and how to live with it.

HIV infections take place in the community and it's in the community that we need to address the root causes of HIV and AIDS. In the communities, we have different categories of key population groups such as sex workers and truck drivers.

Community groups have supported the response in South Sudan through their networks. For instance, by engaging and working with sex workers and community counsellors, we have reduced infections and mortalities, strengthened awareness about HIV and AIDS and supported many to enroll for and adhere to treatment.

At the national level, we are encouraging all community-based organizations (CBOs) to have a component on HIV and AIDS in their interventions because AIDS is a problem to the whole country, and not just individuals.

As a result of these interventions, people are living healthy, long and happy lives. Some are living positively for 30 to 40 years! This is because they know the disease and how to live with it. They take drugs, avoid stress,

alcohol and substance abuse and have declared their HIV status which has helped them overcome the stigma and discrimination.

### Challenges

The main challenge is poverty, meaning that many people cannot afford to have good nutrition, which is necessary to support the treatment that they take. The donors now fund targeted awareness focusing on key populations which has its limitations compared to the general population awareness.

### Call to action

I urge the Government to offer a good operating environment and contribute funds to the HIV response for increased local ownership of the response.

The population should stop looking at people living with HIV as people waiting to die. HIV is a disease like any other; with medication, one can live for a long time.



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# Global Fund Country Team Okays South Sudan's Readiness for the 2024 – 2026 Grant



## The three-year grant seeks to end HIV, TB and malaria, and strengthen health systems

As the current grant cycle comes to an end, partners in the HIV and Tuberculosis (TB) programming are finalizing preparations for the implementation of a three-year grant expected to start on 01 January 2024, and end on 31 December 2026.

Assessing the readiness for the new grant was at the heart of a recent Global Fund Country Team's Mission to South Sudan. Led by Boniface Njenga, Senior Fund Portfolio Manager, the mission took place between 13 November and 17 November 2023.

During the visit, the team met with Government officials and stakeholders in health implementation, including the Ministry of Health, Ministry of Finance and Planning, the Country Coordinating Mechanism (CCM), UNDP, South Sudan Aids Commission, Local Fund Agent, civil society organisations and community groups of persons living with HIV.

“ Mr. Njenga revealed that the Grant Approvals Committee, had reviewed the final version of the South Sudan grant, and “they recommended it to the Board of the Global Fund for approval.”





“We had good meetings with the UNDP and UNICEF, we went through the details, and we are satisfied that the plans are in place; so, once money is approved and released, they are ready to implement,” Njenga said, adding, “We implore all of you who are involved in the implementation to also prepare accordingly and be ready.”

Speaking during the debriefing session with partners, Mr. Njenga revealed that the Grant Approvals Committee, which is made up of senior management at the Global Fund and representatives of technical, bilateral and multilateral partners, had reviewed the final version of the South Sudan grant, and “they recommended it to the Board of the Global Fund for approval.”

He expressed optimism that the grant would most likely be approved, and funds released for the implementation to start in January 2024 as planned, adding, “We intend to do all these things before the end of the year so that implementation starts without delay.”

#### **More COVID-19 response funds**

Mr. Njenga also disclosed that the country’s application for additional funding from the Global Fund’s COVID-19 Response Mechanism (C19RM) Portfolio Optimization grant had also been endorsed. “The investment’s committee recommended the approval of US\$23 million allocation to the Board of the Global Fund,” he added. This would be available for implementation for two years ending in December 2025.

Thus, South Sudan could potentially receive \$165 million to support HIV, TB, malaria and health systems strengthening in the next three years from the Global Fund. This includes USD 90 million for HIV, TB and Resilient and Sustainable Systems for Health (RSSH), USD 52 million for malaria, and the USD23 million through the C19RM PO opportunity. Of this, USD 113 million (90 and 23) could potentially be managed through UNDP.

During the visit, the Global Fund team discussed implementation arrangements with UNDP - who is the Principal Recipient (PR) for AIDS, TB and Health systems strengthening and UNICEF who is the PR for the malaria grant. “We had good meetings with the UNDP and UNICEF, we went through the details, and we are satisfied that the plans are in place; so, once money is approved and released, they are ready to implement,” Njenga said, adding, “We implore all of you who are involved in the implementation to also prepare accordingly and be ready.”

#### **Increased HIV and TB targets**

During the mission, the team also discussed new HIV and TB targets with partners. “Because of your good performance, the targets we expected to achieve by next year 2024, have already been achieved. This means that the performance framework needs to be changed. We can’t go with something that has already been achieved as a target,” Njenga said.

He also called for a more robust national ownership of the response to the three diseases and the health system strengthening, backed by increased Government allocation to the health sector.

During the visit, the Global Fund team also had discussions on co-financing arrangements and the issue of according privileges and immunities to the Global Fund investments in the country.





# Working Together to End AIDS, TB and Strengthen Health Systems

The United Nations Development Programme (UNDP) is a Principal Recipient of the Global Fund in South Sudan, supporting government efforts to end HIV and Tuberculosis (TB), build resilient and sustainable health systems.

Other efforts are, strengthening preparedness and response to pandemics and public health emergencies as well as leadership and coordination at the Ministry of Health and the South Sudan AIDS Commission to enhance health services delivery.

Through the procurement, storage and distribution of health supplies and laboratory reagents for HIV, TB, COVID-19, UNDP ensures access to HIV/AIDS and TB services in over 200 hospitals and health facilities across the country.

Between 2004 and 2010, UNDP also managed the malaria grant and implemented bold malaria reduction targets, protected populations at risk and strengthened the management and coordination capacity of the malaria program in the country.

## The Global AIDS and TB Situation

**39**  
million

People living with HIV/AIDS. Of these, 29.8 million are receiving treatment

**21**  
million

HIV/AIDS related deaths averted between 1996 and 2022

**1.3**  
million

People newly infected with HIV in 2022

**210,000**

Adolescent girls and young women (aged 15–24 years) who acquired HIV in 2022

**4,000**

Adolescent girls and young women acquired HIV every week in 2022 in Africa. Women and girls (of all ages) accounted for 63% of all new HIV infections.

**630,000**

People died of AIDS-related illnesses in 2022

**84,000**

Children who died of HIV/AIDS in 2022.



**75**  
million

Lives saved since 2000 due to global efforts to combat TB

**10.6**  
million

People fell ill with TB in 2022

**31.3**  
million

People who fell ill with TB between 2020–2022 i.e., 10.1 million (2020), 10.6 million (2021) and 10.6 million (2022)

**1.3**  
million

TB death in 2022 including 167,000 deaths among people with HIV

**5.8**  
million

People who died of TB in the past four years i.e., 1.3 million deaths in 2022, 1.6 million in 2021, 1.5 million in 2020 and 1.4 million in 2019.





## Key Results and Lives Saved

Working with the Ministry of Health and partners, our work has been instrumental in reducing AIDS, TB and COVID-19 infections, morbidities, mortalities and strengthening health systems. Health programmes supported by the Global Fund partnership have in the last two decades saved 59 million lives globally with the combined death rate from AIDS, TB, and malaria reducing by more than half since 2002 in the countries where the Global Fund invests.

In 2022, the Global Fund supported 24.5 million people receiving antiretroviral therapy for HIV/AIDS and UNDP – managed grants accounted for over 1.6 million of these people. AIDS-related deaths reduced by 72% between 2002 and 2022 and Global Fund programmes reached 15.3 million people with HIV prevention services in 2022. As a Principal Recipient of Global Fund grants in two regional programmes and 21 countries including South Sudan, UNDP significantly contributes to these results.



### Towards an AIDS free South Sudan

**4,013,214**

People tested of HIV between 2006 and June 2022

**160,000**

People living with HIV in South Sudan

**113,465**

People who received HIV treatment between 2006 and June 2023

**200**

Health facilities supported to offer HIV and TB services

**97,570**

HIV deaths averted between 2006 and June 2023 and June 2023

**62,629**

People currently receiving HIV treatment

**1.9%**

HIV prevalence in 2022 down from 2.3% (2020), and 2.6% (2021)

**81,721**

Female sex workers reached with HIV prevention services between 2020 and 2022.

**34,201**

Internally displaced persons reached with HIV prevention services in 2022.



### Working to end TB

**246,677**

TB laboratory tests held from January 2018 to June 2023

**95,202**

People enrolled on TB treatment between January 2018 and June 2023

**63,046**

TB related deaths averted between January 2018 and June 2023 as a result of our interventions

**55**

GeneXpert machines provided to bolster the country's capacity to test for HIV/AIDS, TB, COVID-19 and other public health threats

**360**

Tablets and internet bundles provided which has improved health care data collection and management.



### COVID-19 response and recovery

**519,301**

COVID-19 tests conducted through provision of rapid diagnostic kits, GeneXpert machines, and testing reagents

**28**

Hospitals and health facilities installed with solar power which improved energy access, service delivery and supported the country's renewable energy transition

**120**

Health facilities equipped with handwashing facilities, personal protective equipment which minimized spread of COVID-19 in hospitals

**640**

Oxygen cylinders offered improved management of critical COVID-19 patients

**275**

Severe COVID-19 cases treated through our case management support

**03**

Incinerators installed, enabling safe disposal of hazardous, pharmaceutical, and other medical waste

**1000**

Liters of oxygen produced daily by two oxygen plants installed to improve management of critical patients and reduce dependence on neighboring countries for oxygen supply



# Solar Installation to Ease Service Delivery in South Sudan's Health Sector

28 hospitals and health facilities will benefit. Installations will be concluded by June 2024



In a bid to unlock health service delivery challenges fueled by power shortages, UNDP, in conjunction with the Government through the Ministry of Health, with funding from the Global Fund, is installing solar power in 28 hospitals and health facilities across the country. Of these, new solar Photovoltaic (PV) systems are being installed in 19 health facilities; while for nine health facilities, battery replacements are being planned because they have already existing solar PV systems.

By November 2023, installation had been completed in five hospitals and health facilities, and was expected to be completed by June 2024 in all the 28 facilities. The six facilities where the installation has been completed are; Juba Teaching Hospital, National Public Health Laboratory, National Medical Stores, Wau Teaching Hospital, Al Sabbah Children Hospital and Kator Primary Healthcare Center (PHCC) – Juba.

The installation will yield multiple benefits including ensuring that medical operations, procedures and laboratory tests are undertaken, improving safety and storage of medical supplies and reagents, while enabling hospitals and health facilities to operate both day and night.

This is already being arranged at Kator PHCC which serves a catchment area of 12,287 people. Ms. Anna Pita, the In-charge, Kator PHCC, says that following the installation, they are finalizing arrangements to start operating seven days a week, both day and night.

“We have been operating Monday to Friday from 8:30 a.m. to 4 p.m. because of lack of power. Only selected critical staff from key units such as maternity and the TB lab would work on Saturday and Sunday, and sometimes at night. With solar, we are going to start operating 24/7,” she said.

South Sudan is one of the world's least electrified countries, with an acute shortage of power supply which affects provision of health services to the country's estimated population of 12 million.

As a result, some able hospitals and health facilities have fuel-run generators. However, most of these generators run only 12 or fewer hours a day due to high maintenance costs. Yet South Sudan has huge potential for solar energy given its warm weather with temperature averages normally above 25°C, and highs exceeding 35°C, particularly during the dry season.





“ With solar, we no longer have to use torches to deliver women.

- Ms. Anna Pita, the In-charge, Kator PHCC

### Ms. Anna Pita, the In-charge, Kator PHCC

We have been operating Monday to Friday from 8:30 a.m. to 4 p.m. because of lack of power. Only selected critical staff from key units like maternity and the TB lab would work on Saturday and Sunday, and sometimes at night. With solar, we are going to start operating 24/7.

Delivering health services without regular power supply has been very challenging especially for emergency procedures like child birth which can not wait. It has been very very difficult to work in the maternity ward at night. Doctors and mid-wives would use torches and sometimes the torches of phones to deliver women!

This is not the ideal, but we would do it to save lives. If a woman came to labour and there is no power, what would you do? You would use your mind to rescue the situation and save the life of the mother and the child. But now we no longer have to use torches.

As for the lab tests, we wouldn't send people away simply because we weren't able to do tests because of

lack of power. In health, we have many ways of solving a problem. If there was no power in the lab, we would do clinical observation and treat people based on signs and symptoms and how the patient felt. But this has its own limitations. For instance, you cannot detect diseases such as typhoid with signs and symptoms. Fever is not a disease; it's a sign of something which can be confirmed under the microscope.

With solar, we are also now able to safely store medicines and drugs, and we have functional air conditioners (Acs).

Solar has also improved the overall security at Kator, and we hope it is going to end a history of theft and breakins which have led to loss and destruction of government property and equipment. Even this room – her office where the interview was held – thieves broke into it and stole computers, modems and water taps. Now we have functional security lights which will deter thieves from coming. The guards are now able to see from far because of the lights.

## The 28 Solar Installation Centers



- |                                  |                               |   |
|----------------------------------|-------------------------------|---|
| 1. Al Sabbah Children Hospital   | 12. Rumbek State Hospital     | 23. National Public Health Laboratory, Juba |
| 2. National Medical Stores, Juba | 13. Maban County Hospital     | 24. Kator Primary Health Care Center,       |
| 3. Wau Teaching Hospital         | 14. Bentiu Hospital           | 25. Munuki Primary Health Care Center, Juba |
| 4. Torit State Hospital          | 15. Aweil State Hospital      | 26. Gurei Primary Health Care Center        |
| 5. Kuajok Hospital               | 16. Yei State Hospital        | 27. Juba Prison Primary Health Care Center  |
| 6. Yambio State Hospital         | 17. Juba Military Hospital    | 28. Imehejek Primary Health Care Center     |
| 7. Rumbek State Hospital         | 18. Kapoeta Civil Hospital    |   |
| 8. Juba Teaching Hospital,       | 19. Nimule Hospital           |   |
| 9. Torit State Hospital          | 20. Ministry of Health, Juba  |   |
| 10. Aweil State Hospital         | 21. Cuiebet Hospital, Rumbek  |   |
| 11. Nzara Hospital               | 22. Gordhim Hospital, Aweilbo |   |



# GOVT, PARTNERS PLEDGE TO DOUBLE Efforts to End HIV/AIDS and TB



Dr. Apal Toby Maduot, Director of National Tuberculosis, Leprosy and Buruli Ulcer Program speaking during the conference

As the 2030 deadline to achieve sustainable development goals draws nearer, stakeholders in the implementation of the HIV/AIDS and Tuberculosis programme in South Sudan have resolved to intensify efforts to eradicate threats presented by the two diseases in order to save lives and ensure health and wellbeing for all.

Convened by the Ministry of Health in conjunction with UNDP, supported by the Global Fund, the three-day HIV/AIDS and TB Annual Review conference took place between 31 October and 2 November 2023, at Royal Palace Hotel, Juba. It was attended by close to 140 participants from the Ministry of Health, South Sudan Aids Commission, health coordinators from 10 states and two administrative areas, donor organizations, international NGOs, civil society organizations and umbrella organizations for people living with HIV.

The main aim of the conference was to review the HIV/AIDS and TB programme performance for the period October 2022 to September 2023 and develop action plans to improve programme delivery.

The conference was also an opportunity to clarify roles, mandate and responsibilities of various stakeholders to improve coordination. The HIV/AIDS and TB programmes seek to reduce infections, morbidities and mortalities and to strengthen health systems to be able to respond to public health threats.

## Scaling up HIV and TB services

Key in the deliberations was a suggestion to scale up provision of HIV/AIDS and TB health services to reach more people. UNDP in partnership with the Government through the Ministry of Health, with funding from the Global Fund, ensures access to HIV/AIDS and TB services in over 200 health facilities including hospitals and health facilities across the country. This, however, leaves many health facilities unserved. According to information from the Ministry of Health, there are 1,955 functional health facilities including 20 hospitals in South Sudan.

## Calls for increased domestic health financing.

Participants also called for increased Government funding to the health sector. While there has been a slight increase in Government support, the budgetary allocation to the health sector is still below the 15% allocation required by the Abuja Declaration of 2001.

For instance, in FY2022/2023, the Government allocated 7% to the health sector compared to 9% in FY2021/2022 and 2% in FY2020/2021, covering mainly salaries, operations and infrastructure.

To combat stigma and discrimination, participants called for intensified awareness on HIV/AIDS and TB prevention measures and deliberate efforts to engage and empower communities and people affected and living with HIV and TB to play a leading role in the response.



“ The main aim of the conference was to review the HIV/AIDS and TB programme performance for the period October 2022 to September 2023 and develop action plans to improve programme delivery.

**Solarizing health facilities**

Participants also decried the low electricity coverage in the country saying that it affects service delivery, including the proper functioning of health facilities, laboratory services and equipment such as GeneXpert machines. Others are storage of drugs and other medical supplies especially given the country’s high temperatures.

South Sudan is one of the world’s least electrified countries in the world, with an acute shortage of power supply.

As a result, some hospitals and health facilities resort to fuel-run generators that often run for 12 or fewer hours a day due to high maintenance costs, which affects those who seek health services outside of normal working hours. This is worse for people whose conditions need urgent medical procedures. As a remedy, UNDP, with funding from Global Fund, is installing solar power in 28 health facilities including hospitals across the country, to ensure continuous supply of electricity and functioning of health facilities.

The conference also discussed measures to improve coordination, data processing, reporting and data use, integration and monitoring.

The 2023 Annual HIV/AIDS and TB review conference ended on a climax with participants promising to intensify efforts in prevention, care and treatment to end the two diseases by 2030 – which is the timeline to achieve all the 17 sustainable development goals.



Dr. Acol Korium Deputy Chairperson SSAC



Mr. Russell Armstrong, UNDP – Global Fund Programme Coordination Advisor



# With Riverside Warehouse, we ensure supply of HIV/AIDS and TB Drugs

**For people living with HIV/AIDS and TB, Riverside Warehouse is more than a building; it's a source of health supplies**

Five kilometers east of Juba on Bor Road is a big, perimeter wall, housing the Riverside Warehouse Gumbo and other health installations. These include an oxygen plant that produces 500 litres of medical oxygen daily and an incinerator that handles safe disposal of hazardous, medical and pharmaceutical waste from the warehouse and nearby hospitals and health facilities.

To the estimated 160,000 people living with HIV/AIDS and TB in South Sudan, this is more than a building. It is a storage for vital medical supplies used to manage the two diseases.

The availability of these medical supplies encourages HIV/AIDS and TB testing and ensures that those who test positive are enrolled for treatment; and this has advanced national efforts to end HIV/AIDS, TB and COVID-19.

The warehouse also housed essential COVID-19 supplies such as test kits and personnel protective equipment which strengthened the country's response and recovery from the pandemic. Over 200 hospitals and health facilities across the country get HIV/AIDS and TB drugs, laboratory reagents, and COVID-19 testing kits and PPEs from this stockroom.

UNDP in support of the Government and people of South Sudan through the Ministry of Health, with funding from the Global Fund, procured and distributed rapid diagnostic kits, GeneXpert machines and reagents which supported 519,301 COVID-19 tests in the country.

“Over 200 hospitals and health facilities across the country get HIV/AIDS and TB drugs, laboratory reagents, and COVID-19 testing kits and PPEs from this stockroom.”

Similarly, through our support, 4,103,214 HIV tests were conducted between 2006 and 2022, and 113,465 people received treatment between 2006 and June 2023.

Since 2017, UNDP runs the warehouse in conjunction with the Ministry of Health as part of our support to strengthening procurement and supply chain management.



The UNDP Deputy Resident Representative – Programmes, Mr. Titus Osundina (L) and the UNDP Deputy Resident Representative – Operations, Mrs. Debab Asrat Ynessu (R) with UNDP staff on a recent visit to Riverside Warehouse Gumbo.



### Managing supplies and refills

The warehouse uses mSupply – a pharmaceutical management system to issue and release supplies, manage incoming supplies and orders. The system issues stock warnings or alerts for cold storage temperature breaches and expiry dates, and allows the release of goods on first expired, first out (FEFO) basis which minimizes wastage.

Another feature of the warehouse is a cold chain room which captures real-time temperatures in cold storage facilities. An alert is sent as soon as a breach is detected, specifying the batch location.

### Internship for medical and pharmacist students

Owing to the professionalism and success of the warehouse operations, the storeroom is increasingly being sought by medical and pharmacy graduates for internship before they are licensed to operate by the South Sudan General Medical Council. In the past three years, a total of 30 students have had their internship at the warehouse.



# Former Interns Recall, Share **Transformational** **Experiences**



**Nguech Alit Nguech**  
Founder and Proprietor, Prime Health Pharmacy and Warehouse in Juba

I did my internship at Riverside Warehouse Gumbo between September and October 2019 after graduating with a Bachelor of Pharmacy from Jimma University, Ethiopia. The internship exposed me to South Sudan's supply chain and warehouse management context, inventory control and managing expiry of stock as well as online stock control systems like using mSupply that UNDP uses. I was also exposed to safe disposal practices for medical and pharmaceutical waste. Being at the centre

of medical supplies got me connected to so many people in almost all the hospitals in South Sudan.

The most stressful part was having so many emails from the health facilities across the country requesting for drugs. I had to prioritize and work with colleagues to identify the drugs, manage the distribution and follow up to ensure that the drugs reach the intended facilities.

Warehouse management has a lot of challenges. You need to love your job to be able to move around the warehouse to determine the stock levels, see which drug is expiring and what is going wrong. If you don't do that, so much stock will go to waste and that will be costly to the organization and risky to the people that depend on the drugs.

Immediately after the internship, I was employed by Samaritan Purse, an international organization, to improve supply chain in Maban County Hospital (Bunj Hospital) in Greater Upper Nile State.

I resigned after one year to join the Ministry of Health in Juba and later started Prime Health Pharmacy and Warehouse in Juba specializing in providing hard-to-find medicines to clinics, pharmacies and some NGOs. I get such medicines from countries like Turkey and India. My experience at the warehouse influenced this decision. My internship experience was really fulfilling because providing drugs and test kits directly touches people's lives.

I graduated in June 2019, from Rajiv Gandhi University for Health Services University in India and came to Juba in March 2020. The process here is that when you graduate, you report to the Ministry of Health who enroll you in a six-month training course to expose you to different fields. The last segment of that training for me was the internship at Riverside Warehouse Gumbo for one month. It was headed by Dr. Santino Adibo at the time.

I now work in the supply department of the state ministry of health, and I also started a retail pharmacy called Planet Health Pharmacy. The pharmacy is an opportunity for me to provide my community with the supplies that they need. I can provide them in the private sector in an affordable way.



**Ms. Dalia James Wani Loro**  
Manager, Planet Health Pharmacy



There are a lot of gaps in South Sudan's public sector regarding supply chain. The citizens cannot get the services they need and even we professionals cannot provide them because we lack many skills.

The training gave me a direction for my career, and I hope one day, I will be able to change the supply chain processes and be able to provide services. Through supply chain, health facilities are equipped with essential medicines which helps people to get the services that they need. So, through the supply chain, we save lives. People will not just die because of preventable and curable diseases.

My internship was very helpful – especially knowing Dr. Santino Adibo who was heading the warehouse at the time was life-changing. He had a lot of passion for the profession, and he made us appreciate its importance in the country. In fact, that influenced me to shift my career to that direction, and I am currently doing my master's in supply chain management. da to a middle income status in 30 years.



# PICTORIAL



Blood saves lives and is crucial in handling health emergencies. With funding from the Global Fund, UNDP offered two Automatic blood components extractors to South Sudan's National Blood Transfusion Services to increase blood component production, safety of operators and minimize waste. With this equipment, South Sudan is building a robust blood transfusion service.



Participants during the Annual HIV/AIDS and TB review conference. They resolved to scale up prevention, care and treatment interventions to end the two diseases



Innovation is key in accelerating progress in the fight against HIV/AIDS and TB while preparing the world for future pandemics. We offered and installed computer and Artificial Intelligence aided digital X-ray machines to scale up –TB screening and treatment. Recently, we installed X-ray machines and trained health workers in Torit and Rumbek State Hospitals on how to use them.





The UNDP Deputy Resident Representative – Programmes Mr. Titus Osundina (L) and the UNDP Deputy Resident Representative – Operations Mrs. Debab Asrat Ynessu (R) and UNDP staff during a recent visit to Riverside Warehouse Gumbo.

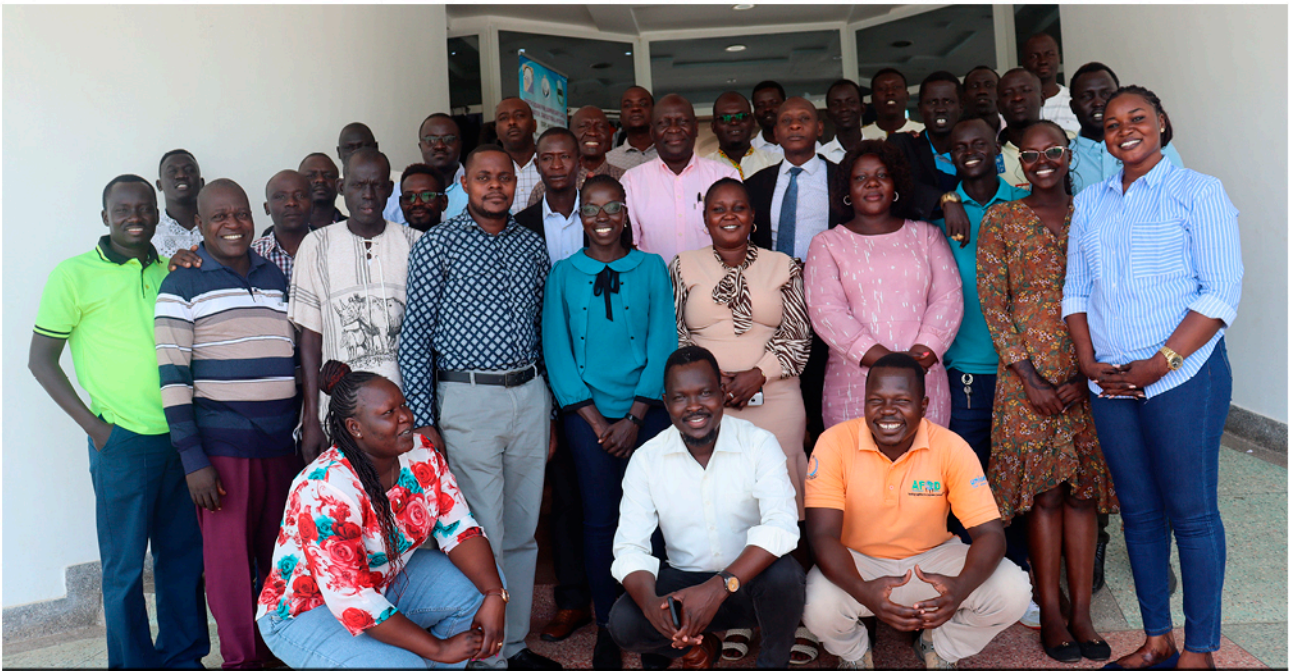


Assets are necessary to achieve project objectives and in providing better health services. We held an engaging awareness workshop on asset management with our implementation partners in the Ministry of Health and Non-Governmental Organizations with a view of promoting safe custody and adherence to asset management protocols in programme delivery.

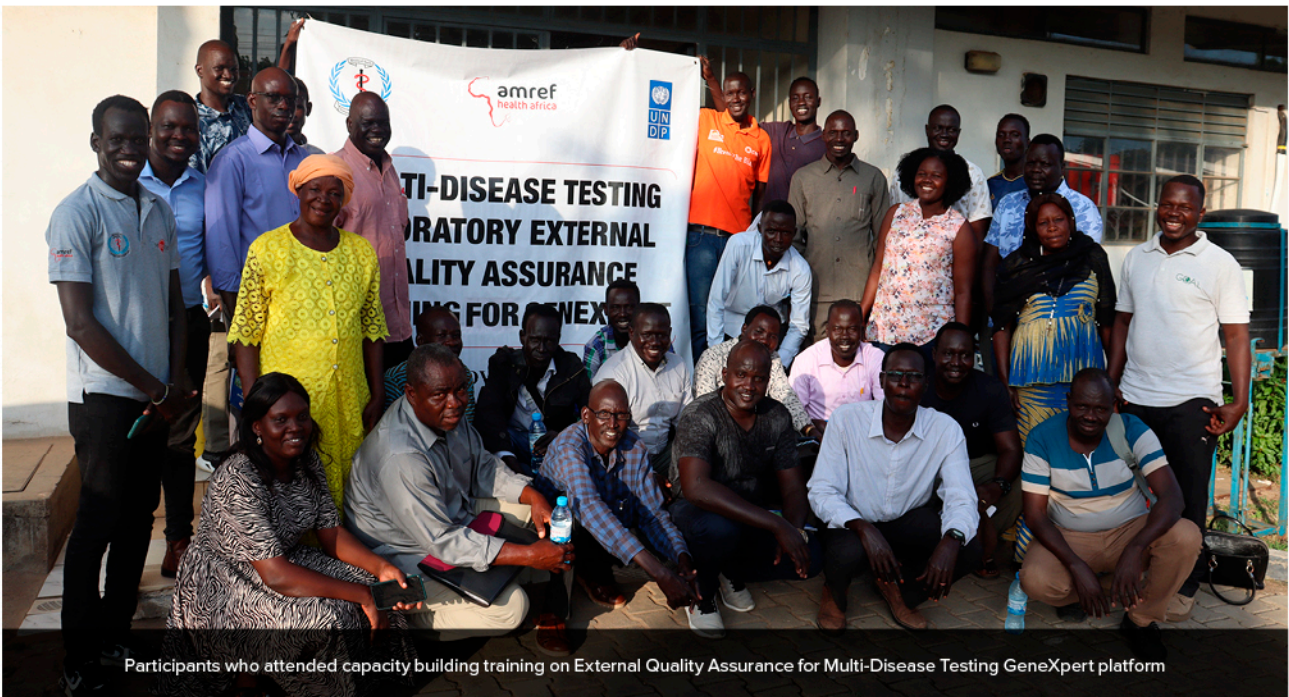


Participants from UNDP and the Ministry of Health attended an electronic logistic management information system (eLMIS) training of trainers. UNDP and partners use the eLMIS (mSupply) system to manage stock in warehouses and in asset management.





Participants of the Diagnostic Network Optimization Assessment Overview Workshop held to assess the status of laboratory services in all major health facilities with a view of strengthening the sector.



Participants who attended capacity building training on External Quality Assurance for Multi-Disease Testing GeneXpert platform



# OUR PARTNERS



<b>Funder</b>
The Global Fund to Fight AIDS, Tuberculosis and Malaria
<b>Government</b>
The Government of South Sudan, Ministry of Health, South Sudan AIDS Commission
<b>United Nations</b>
United Nations Population Fund (UNFPA)
The Joint United Nations Programme on HIV/AIDS (UNAIDS)
The United Nations Children's Fund (UNICEF)
International Organisation for Migration (IOM)

United Nations High Commissioner for Refugees (UNHCR)
UNHCR
<b>NGOs</b>
Médecins Sans Frontières (MSF)
AMREF
Arkangelo Ali Association (AAA), Cordaid and International Centre for AIDS Care and Treatment Program (ICAP)
National Empowerment of Positive Women United (NEPWU) and South Sudan Network of People Living with HIV/AIDS (SNEP+)

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