We believe in the dignity of all.

Everyone has a fundamental right to human decency. For more than 100 years, firm in our Catholic faith, we’ve been working to deliver the best possible health solutions to women and children in need with respect and love. We’re ready to make it 100 more.
We believe change starts with her.

We work tirelessly to improve the health of women and children because they are disproportionately affected by illness and poverty. We know that healthy, educated, and empowered women are better able to raise healthy, educated, and confident children.

We believe in people.

We strive to live out our core values of collaboration, love, excellence, and respect every day. Our work is meaningful and we believe in opportunities to learn and grow.
A Population at Risk

Since its inception, the Republic of South Sudan, the world’s newest nation, has suffered from civil unrest that has destroyed both social services and health infrastructure. Its key health indicators are among the worst in the world:

- **Life expectancy**: 42 years
- **Child mortality**: 789 per 100,000 live births
- **Maternal mortality**: 92.6 deaths per 1,000 births
- **Maternal care**: 19.4% of births attended by a skilled personnel
- **Poverty**: 51% of population living on less than $1 per day

The birth rate for adolescent girls is 300 births per 1000 and coverage of antenatal care remains low at 4.8 percent. Among children under age two, only 6.3 percent are full immunized. Of all households, only 7.4 percent use adequate sanitation and only 68.7 percent have access to improved drinking water sources. Malaria is the leading cause of death; two in every 10 people seen at health facilities die from malaria.

Political Instability

On 15 December 2013, civil war broke out in South Sudan. Despite ongoing peace negotiations and multiple attempts to achieve a cease-fire, violence continues to consume much of South Sudan.

The population experienced further hostilities in July 2016. Nationwide uncertainty has disrupted agricultural activities and contributed to major food shortages, and on 20 February 2017, the United Nations declared a state of famine in South Sudan. Insecurity has been such a major concern, especially in the former Western Equatoria State, that the government has imposed curfews (from 9 pm to 7 am). CMMB’s project site in Ezo has been largely inaccessible since December 2015, although operations are beginning to return to normal. Inflation has increased—it is now 700 percent—and South Sudan pounds have rapidly lost value against the dollar. These fluctuations have a devastating impact on the livelihood of the most marginalized, increasing the price of food, medicine, and other essential goods.
Overall leadership and strategic direction of the CMMB country program are provided by the country director. The program director accomplishes strategic objectives and oversees multiple project activities. Our safety and risk management officer provides strategic direction on staff safety and risk management, as well as taking the lead on staff compliance and implementation of procedures to effectively gauge performance and capacity support needs. A resource mobilization and communications manager assists in mobilizing resources, publicizing country office initiatives, and providing overall marketing.

The design, monitoring, and evaluation manager oversees program planning, monitoring, evaluation, and knowledge management. The human resources officer provides leadership for staff recruitment and training, and the finance and administration director provides strategic leadership for finance and operations.

The 13-member South Sudan Leadership Team effectively and efficiently guides the office mission toward CMMB’s overall global vision, strategic objectives, and of the mission as defined by the country office strategic plan.

CMMB has implemented programs and projects through such funders as the U.S. government (CDC/PEPFAR), United Nations High Commission on Refugees (UNHCR), UNICEF, Sudan Relief Fund, and the African Mission Healthcare Foundation. CMMB has also partnered with dozens of local and international NGOs.

CMMB has been implementing projects related to health services, gender-based violence prevention and survivor counseling, child protection, strengthening health service delivery, and HIV/AIDS prevention, care, and treatment.
Partnering with local communities, CMMB is transforming the lives of some of the world’s most vulnerable women and children by tackling the deep-rooted causes of morbidity and mortality. Through our Children and Mothers Partnerships (CHAMPS) we are providing life-saving medical care for pregnant women and newborns, and fighting disease and poverty. Working with our public and private partners, CMMB is saving lives and transforming communities.

We are currently working in eight CHAMPS sites through our five country offices, including Yambio, Ezo, and Nzara in South Sudan. In these communities, we are:

- Building and renovating health facilities and providing medical equipment
- Providing emergency transportation to save lives
- Placing volunteer doctors and nurses to build the capacity of local facilities and staff
- Providing essential medicines and supplies
- Training community health workers
- Increasing access to safe water and sanitation
- Improving nutrition and livelihoods

And we have made a commitment to each community to keep on working together for the next 15 to 20 years.

Our solution integrates the key levers of good health:

- A well-functioning local healthcare system accessible to all
- Healthy pregnancies, safe deliveries, and healthy childhoods for all women and children
- Essential and lifesaving accessible medicines
- Safe water and good sanitation for all
- Increased nutrition through access to economic opportunities
By tackling the deep-rooted causes of morbidity and mortality, CMMB’s global Children’s and Mothers’ Partnerships (CHAMPS) program works to transform the lives of vulnerable women and children; by improving their health, it hopes to improve the health of their entire communities. In South Sudan, our CHAMPS sites are located in Ezo, Yambio, and Nzara, in the former Western Equatoria State. CMMB has made a 15-year commitment to these communities and is focusing on safe motherhood, water and sanitation, and women’s empowerment.

The Safe Motherhood project—initiated in January 2012 and based at Ezo Primary Health Care Center (PHCC)—provides skilled birth attendants, emergency obstetric and neonatal care services (which were previously lacking), and emergency transportation for pregnant women. It was initially supported by the African Mission Healthcare Foundation. With the expansion of CMMB’s safe motherhood activities, additional donors also contributed.

CMMB now runs safe motherhood projects at Ezo PHCC and at Nzara PHCC under grants from the Sudan Relief Fund and African Mission Healthcare Foundation. Between July and September 2016, CMMB offered 24/7 emergency maternal and child obstetric services at Nzara PHCC maternity department, providing a full package of safe motherhood activities in collaboration with the Nzara County Health Department. After the Nzara PHCC operating theater was rendered fully functional, CMMB posted a volunteer doctor there to give technical support and to handle complicated cases.

Traditional birth attendants raised community awareness of these services after having been trained on their roles and responsibilities to support safe motherhood. FM radio talk shows further disseminated the message, contributing to the increases seen in mothers opting for facility births and the drop in maternal mortality.

**Partnership with the Comboni Sisters, Nzara Hospital**

CMMB partners with the Comboni Sisters under the Catholic Diocese of Tambura and Yambio through African Mission Healthcare Foundation and the Sudan Relief Fund to deliver safe motherhood services to communities in Nzara. CMMB donated one Toyota Land Cruiser to support the sisters in the running of the hospital. In 2015, CMMB provided a subgrant to the Comboni Sisters to support service delivery within St. Teresa Hospital. In 2016, CMMB signed agreements with the Comboni Sisters to support Nzara Hospital, notably via the installation of a piped water system to permit hand-washing, among other sound health practices.
In the former Western Equatoria State, CMMB is implementing ANISA 2, the five-year $7.5 million HIV prevention and care follow-on project to CMMB’s five-year Anisa 1 project. Based in Yambio, Nzara, and Ezo, both projects have aimed to reduce the incidence of new HIV infections and to improve care and support to persons living with HIV by strengthening actors at the community, county, and state levels.

Project activities include:

- Expanding HIV counseling and testing through mobile outreach and community health centers
- Strengthening delivery and coverage of services for prevention of mother-to-child transmission of HIV
- Training to strengthen the ability of traditional birth attendants to advocate to mothers to seek antenatal care
- Labor and delivery in a health facility, and postnatal care
- HIV prevention education
- Prevention with positives
- Psychosocial support by mentor mothers and individuals who are HIV positive. Training for health workers in project areas. Laboratory assessments and lab systems strengthening
- Provision of point-of-care services for individuals testing HIV positive. Broadening of palliative care services, including home based care and psychosocial support
- Stigma reduction

Local partners include: the Ministry of Health and its AIDS Commission; Action Africa Help (AAH); the Catholic Diocese of Yambio/Tambura; the Episcopal Church of Sudan; and several community-based organizations.
Resources from the Health Pooled Fund (HPF) supported another project in Mvolo County, also in the former Western Equatoria State; HPF is a donor consortium comprising government development agencies of Canada, Sweden, the United Kingdom, the European Union, and the United States.

The project ran from April to mid-November in 2016 and focused mainly on service delivery, health systems strengthening, and community engagement, with a major emphasis on maternal and child health. Services included:

- Basic and comprehensive emergency maternal, neonatal, and obstetric care
- Focused antenatal and postnatal care for labor and delivery
- Education on water, sanitation, and hygiene; and
- Immunization services and integrated management of neonatal and childhood illness and the like

CMMB also worked with the community to raise demand for healthcare and with facilities to raise the primary health services quality level—for example, working with healthcare staff to boost motivation and know-how, organizing for better referrals, and providing technical advice on pharmaceuticals supply.

Maternal and Child Health

Funded by UNICEF and in partnership with the former Western Equatoria State Ministry of Health, CMMB implemented this project supporting provision of services for antenatal care and prevention of mother-to-child transmission of HIV. The project sought to improve use of health, nutrition, and HIV/AIDS services by infants, children, adolescents, and pregnant women following ministry of health protocols. CMMB worked toward project goals in Yambio State Hospital from July 2015 to September 2016. A proposal to continue work with a second tranche of funding awaits approval.

In partnership with UNICEF, CMMB is operating in Ezo, Mvolo, and Nzara to implement nutrition services, including programs for community-based management of acute malnutrition and infant and young child feeding.
Projects in Yambio, Nzara, and Ezo focused on child protection and gender-based violence (GBV) through community-based actions and by fostering access to appropriate services for survivors and communities. The project’s overall objectives were to improve the psychosocial well-being of children; to support separated and unaccompanied children; to increase survivors’ access to response services for GBV; and to create awareness of issues affecting women and children, especially issues relating to violence, exploitation, and abuse. CMMB implemented activities in close collaboration with the State Ministry of Education, Gender and Social Welfare, communities, and other child protection actors in Yambio, Nzara, and Ezo.

Project activities included provision of psychosocial support services in the form of structured, child-friendly activities such as sports, creative arts, and life skills education, facilitated by trainers at the project sites. With partners, CMMB offered support for unaccompanied children and children separated from their families as a result of unrest, including those abducted by the Lord’s Resistance Army. CMMB also supported women and girls exposed to violence through community care programs. A joint initiative with UNICEF and other partners established the Special Protection Unit at Yambio State hospital, a pilot in the state.

Proposals for other projects await response from donors. These projects will address the urgent need to scale up integration of GBV risk mitigation, prevention, and response throughout South Sudan. Without appropriate GBV protection awareness underpinning both planning and implementation across all sectors, lives will be at risk, compromising the population’s security, privacy, and dignity.

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Pharmaceutical Donations

As part of CMMB’s global Healing Help program, CMMB South Sudan received 2.5 metric tons of pharmaceuticals donated by Cross Catholic for emergency health to meet the needs of children and mothers in Yambio, Ezo, and Nzara counties. The medical supplies were distributed to Yambio Primary Health Care Center through the county health department.

At the same time, additional medical supplies were distributed to Nzara Primary Health Care Center and Nzara Hospital, supported by the Comboni Sisters.

Volunteer Program

In 2015, CMMB global deployed two volunteers to CMMB South Sudan. Elisha Caldwell provided much-needed skills to communicate to a wider audience about CMMB South Sudan and its safe motherhood programs. Dr. Rachael Consoli worked in Ezo and Nzara for one year, delivering babies and helping their mothers.

She was the longest serving of a number of doctors who have served or are planning to serve in Nzara Hospital under the wings of the CMMB volunteer program.

Dr. Harry Owens Jr., served for three months at Nzara Hospital in South Sudan. He was on call 7 days a week, providing much needed healthcare to the most vulnerable residents of the surrounding communities.

“I felt privileged to be able to serve at Nzara Hospital for a short while and to assist the local staff in the important work they are doing to improve the health of the community.”
Years of civil war have caused a refugee crisis and a collapsing economy that have taken a massive toll on South Sudan. When many people are uprooted from their homes and forced to live in overcrowded conditions in Internally Displaced Persons (IDP) camps, access to food, clean water and sanitation services, health, nutrition, and child protection becomes critical to their health and wellbeing. CMMB, along with several partners on the ground, have worked hard to provide emergency relief.

In February 2017, widespread food shortages lead the UN to declare a state of famine in South Sudan, the first in any part of the world in six years. Currently, CMMB South Sudan is assisting Rimenze and Kasia IDPs with emergency health services, nutrition, water and sanitation, HIV/AIDS, and child protection issues.

CMMB’s initial response to the most critically affected provided nearly 6,000 people with a three-month supply of:

- food items such as beans, maize, salt, flour, and cooking oil
- access to health care
- nutritional screening and treatment of malnourished children
- clean water, hygiene and health education

CMMB was also able to provide 6,000 conflict-affected internally displaced households with emergency health, nutrition, child protection, and water & sanitation services.

Last year, in partnership with Cross Catholic, CMMB delivered three Interagency Emergency Health Kits (IEHKs) to South Sudan to enhance mobile clinic outreach to internally displaced persons. These kits are designed for use where there is a disruption of medical supplies in an emergency setting to fill the gap until medical supply mechanisms are restored. One emergency kit meets the basic health needs of 10,000 people for approximately three months.

Learn more by visiting cmmb.org/south-sudan