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Campaign



Dr. Meroni Abraham, a UNV Medical Officer serving at the Level I Clinic in Malakal, South Sudan, treats a child sheltering in the UNMISS site for the protection of civilians. (Issac Alebe Avoro, UNMISS Public Information Office, 2013)

## UNV Medical Officer provides quality health care within UNMISS civilian protection site in Malakal - An in-depth interview with Dr. Meroni Abraham

The UNV Field Unit in South Sudan recently conducted an in-depth interview with UNV Medical Officer Dr. Meroni Abraham, who is currently assigned to the Level 1 Clinic at the United Nations Mission in South Sudan (UNMISS) in Malakal. Dr. Abraham vividly describes how he provides quality health care in the aftermath of conflict to the many sheltering in the UNMISS site for the protection of civilians.

*Dr. Meroni Abraham joined the United Nations Mission in South Sudan (UNMISS) as a UNV Medical Officer in 2012, after having worked as a medical doctor in Ethiopia and Eritrea for over 15 years. The UN Volunteers Field Unit in South Sudan recently had the opportunity to ask the doctor about his experiences working in Malakal during the ongoing armed conflict and providing medical services to civilians who have taken shelter within the UNMISS protection site. In the following **in-depth interview**, he vividly describes how he provides quality health care in the aftermath of conflict.*

*Describe the types of healthcare services you have been able to provide within the protection of the civilian site within the Malakal UNMISS compound.*

Meroni: Previously, the Level I Clinic [where I work] was providing medical care for UNMISS and personnel of UN agencies, funds and programs working in Upper Nile State. On average, we saw 20 to 30 patients a day.

Since the beginning of crisis, hundreds of civilians have flocked to the Malakal UNMISS compound seeking refuge. Suddenly, medical care for these civilians became the responsibility of the Level I Clinic as many of the healthcare-providing non-governmental organizations (NGOs) had evacuated their staff out of Malakal due to the fighting.

Even though we have seen patients from all age categories, 80 per cent of our patients are women and children. Common problems include communicable diseases such as malaria, diarrhea, respiratory tract infections, eye and skin infections, infected wounds, malnutrition, antenatal, delivery and postnatal problems. As a result, the Level I Clinic has been treating more than 250 daily. Since the onset of the crisis this clinic has seen about 3,800 civilians since the onset of the crisis.

*How would you describe the health and wellbeing of the civilians within the Malakal*

*protection site?*

Meroni: The health and wellbeing of the civilians staying in the Malakal protection site is getting better by the day. At the beginning of the crisis, the Level I Clinic and the Level II Hospital were the only facilities providing medical care for all of the civilians within the protection site. However, as fighting lessened, agencies and NGOs opened clinics to help support our efforts. For example, the World Health Organization (WHO) has resumed operations and is now organizing vaccination campaigns.

*What are some of the unique healthcare needs that have arisen in the protection of civilians site and how have you and partner organizations dealt with these needs?*

Meroni: One of the unique issues we face is addressing the needs of children with severe malnutrition. As our health facilities don't have therapeutic feeding programs for these children, we were initially limited to only treating the medical complications that arose from their malnutrition and then providing their mothers with nutritional advice. At present, however, we are working with NGOs to better address malnutrition within the site.

Maternal and child health issues are also prominent within the protection site. As I mentioned, before the crisis, Level I Clinic was only seeing UN personnel. Therefore, we were not entirely prepared to accommodate the sudden influx of large numbers of sick children who started arriving at the clinic. Furthermore, as we had no midwives or designated delivery room in our health facilities, providing care for pregnant women was a big challenge. We did our best to respond, however, with the resources we had on hand. Today, a designated labor room has been established with the collaboration of our clinic, the UNMISS Level II Hospital and the NGO International Medical Corps.

*What is the most significant challenge you faced during the conflict and how have you overcome this challenge to ensure you are working as effectively as you can?*

Meroni: The biggest challenge in providing medical care to the civilians in the protection site has been our lack of resources. During the time of the most intense fighting, the clinic treated many wounded patients who required a large amount of dressing materials, IV fluids, antibiotics and other medications.

Once the initial fighting stopped, the nature of medical problems changed and we started to see a huge number of sick children. The challenge then became a shortage of pediatric drugs – drugs specifically for children. As flights from Juba were interrupted for many days, we resorted to using lower dosages of adult tablets. Although we have been able to receive new shipments of drugs, we are still frequently faced with shortages of pediatric drugs which are necessary for the many severely ill children we are treating.

*Despite the many years he had spent as a medical doctor, Dr. Abraham says his experience treating civilians during the recent fighting has helped him learn how to stay composed and*

*demonstrate leadership during a crisis situation. His colleagues and fellow UN Volunteers attest to this reporting that he has worked tirelessly in an extremely challenging environment to treat some of the most vulnerable civilians housed within the Malakal UNMISS protection site. They add that he has also provided unrelenting support and a positive spirit to the other UN Volunteers working there.*

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