

HUMAN APPEAL DEVELOPMENT ORGANIZATION (HADO)



ANNUAL REPORT 2022



Acknowledgements

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Executive Summary

In 2022, Human Appeal Development Organization (HADO) implemented an Integrated Health, Nutrition, and WASH Emergency Response across Central Equatoria State, targeting conflict-affected and underserved communities in Lainya, Yei, Morobo, Kaya, and surrounding areas including Bungu, Kuli Papa, Ganji, Kagwada, and Wonduruba Administrative Payam. The intervention was delivered between January and May 2022 in response to urgent humanitarian needs driven by limited access to healthcare, high disease burden, malnutrition, and inadequate water and sanitation systems.

The operational context was characterized by overlapping challenges, including localized conflict, displacement, weak health system capacity, poor infrastructure, and heightened risks of infectious disease outbreaks such as Ebola Virus Disease (EVD), malaria, and acute respiratory infections. Many communities—particularly those in remote and hard-to-reach areas—faced significant barriers to accessing essential services, further exacerbating vulnerabilities among women, children, and displaced populations.

To address these interconnected challenges, HADO adopted an integrated, multi-sectoral approach combining health, nutrition, and WASH interventions. Service delivery was implemented through a combination of static health facilities and mobile outreach teams, enabling the organization to reach isolated populations and ensure equitable access to life-saving services.

Key achievements of the response include:

- Provision of essential primary healthcare services to over 6,000 individuals through outpatient consultations, diagnosis, and treatment of common illnesses.
- Screening of children and vulnerable groups for malnutrition, with referral pathways established for severe cases to ensure timely and appropriate care.
- Training of more than 50 health workers on Infection Prevention and Control (IPC) using Ministry of Health–approved modules, strengthening frontline capacity to prevent and manage infectious diseases.
- Delivery of hygiene promotion and risk communication activities that reached over 18,500 community members, improving awareness of disease prevention, sanitation, and health-seeking behaviors.
- Distribution of over 1,000 Ebola Virus Disease (EVD) kits to health facilities and communities, enhancing preparedness and response capacity.
- Establishment and strengthening of referral systems to ensure access to specialized healthcare services.

A core strength of the intervention was its emphasis on community engagement and participation, with local leaders and community structures playing an active role in mobilization, awareness campaigns, and service delivery. This approach not only improved programme acceptance and reach but also fostered local ownership and sustainability.

HADO’s response was further reinforced through strong partnerships with the State Ministry of Health and the World Health Organization (WHO), which provided technical guidance, training resources, and critical supplies. Collaboration with local authorities and community leaders ensured effective coordination and alignment with national health priorities.

Despite significant operational challenges—including limited access due to poor road infrastructure, logistical constraints, shortages of medical supplies, and high disease burden—HADO successfully delivered integrated services that addressed multiple vulnerabilities simultaneously. The use of mobile clinics proved particularly effective in overcoming access barriers and reaching underserved populations.

Overall, HADO's 2022 emergency response contributed to:

- Improved access to essential healthcare and nutrition services
- Strengthened infection prevention and disease control systems
- Increased community awareness and adoption of healthy practices
- Enhanced resilience among vulnerable populations

The experience and lessons gained from this response have reinforced the importance of integrated programming, capacity building, and community-centered approaches. These insights continue to inform HADO's strategic direction and commitment to delivering impactful, sustainable interventions across South Sudan.

1. Background

This Annual Report presents the key achievements, operational context, and lessons learned from the implementation of Human Appeal Development Organization (HADO)'s programmes in 2022. It provides an overview of the organization's response to urgent humanitarian needs in Central Equatoria State, particularly in Lainya, Yei, Morobo, Kaya, and surrounding hard-to-reach areas.

The year 2022 was marked by significant humanitarian challenges in South Sudan, including localized conflict, displacement, weak health systems, and heightened risks of infectious disease outbreaks. Communities in HADO's areas of operation faced limited access to essential healthcare, poor water and sanitation conditions, and low levels of awareness on disease prevention. These factors contributed to increased vulnerability, particularly among women, children, and displaced populations.

In response, HADO implemented an Integrated Health, Nutrition, and WASH Emergency Response between January and May 2022. The intervention aimed to improve access to life-saving services through mobile and static service delivery, strengthen disease prevention and infection control systems, and enhance community awareness and resilience.

This report documents the results of these interventions, highlighting key outputs such as service delivery coverage, capacity building of health workers, community engagement, and partnerships with government and international agencies. It also reflects on the challenges encountered and lessons learned, which continue to inform HADO's programming and strategic direction.

The purpose of this report is to provide accountability to stakeholders, inform partners and donors, and contribute to learning and evidence-based programming. It also serves as a record of HADO's commitment to delivering integrated, community-centered interventions that address both immediate humanitarian needs and longer-term resilience in South Sudan.

2. Context Overview 2022

In 2022, South Sudan continued to face a complex humanitarian context characterized by overlapping and interrelated challenges, including conflict, displacement, disease outbreaks, weak health systems, and limited access to basic services. Central Equatoria State—particularly Lainya, Yei, Morobo, Kaya, and surrounding areas such as Wonduruba, Ganji, Kagwada, Bungu, and Kuli Papa—experienced these challenges in acute and interconnected ways. This context directly informed the design and implementation of HADO’s integrated Health, Nutrition, and WASH emergency response.

Conflict, Displacement, and Access Constraints

Although relative stability improved in some areas during 2022, localized insecurity, presence of armed groups, and intercommunal tensions persisted across parts of Central Equatoria. These conditions resulted in periodic displacement, disruption of livelihoods, and reduced access to essential services.

Many communities remained in remote and hard-to-reach locations with poor road infrastructure, particularly during the rainy season, which significantly constrained humanitarian access and delayed service delivery. Displaced and returnee populations often settled in underserved areas with limited infrastructure, placing additional pressure on already fragile health and WASH systems.

These access and displacement challenges underscored the importance of flexible service delivery models. In response, HADO adopted mobile outreach approaches to ensure that isolated and vulnerable populations could access critical health and nutrition services.

Weak Health System Capacity

The health system in 2022 remained fragile, particularly in rural and conflict-affected areas. Many health facilities were either non-functional or operating at limited capacity due to shortages of trained personnel, essential medicines, and medical supplies.

Communities in remote areas, including Wonduruba and surrounding payams, often faced long distances to the nearest health facility. This contributed to delayed care-seeking behavior and increased the risk of complications from preventable and treatable conditions.

In addition, limited capacity for Infection Prevention and Control (IPC) within health facilities increased the risk of disease transmission among both patients and healthcare workers. These systemic gaps highlighted the need for health systems strengthening, including capacity building of health workers, support to referral systems, and provision of services through mobile clinics.

High Disease Burden and Outbreak Risks

South Sudan remained highly vulnerable to infectious disease outbreaks in 2022 due to weak surveillance systems, population movement, and limited preventive measures. The risk of Ebola Virus Disease (EVD), alongside endemic illnesses such as malaria, cholera, and acute respiratory infections, posed a significant public health threat.

Low levels of community awareness on disease prevention further increased vulnerability, particularly in rural areas with limited access to accurate health information. At the same time, many health facilities lacked the necessary equipment and supplies to effectively prevent and respond to outbreaks.

This context necessitated a strong focus on disease prevention and response, including IPC training, distribution of EVD kits, and implementation of risk communication and community engagement activities.

Malnutrition and Limited Nutrition Services

Malnutrition remained a critical concern in 2022, particularly among children under five and pregnant and lactating women. Contributing factors included food insecurity, poor dietary diversity, and limited access to nutrition services.

In many target areas, screening and treatment services for acute malnutrition were either unavailable or inaccessible, leading to under-detection and delayed management of cases. Nutrition challenges were further compounded by high disease burden, poor WASH conditions, and limited knowledge of appropriate infant and young child feeding practices.

These factors reinforced the need for integrated nutrition interventions, including community-based screening, referral systems, and linkage to health services.

WASH Gaps and Public Health Risks

Access to safe water, sanitation, and hygiene services remained severely limited across rural and peri-urban communities. Many households relied on unsafe water sources such as rivers and unprotected wells, increasing the risk of waterborne diseases.

Sanitation coverage was low, with widespread open defecation due to lack of latrines. Poor hygiene practices, combined with overcrowded conditions in displacement settings, further contributed to the spread of communicable diseases.

Health facilities also faced significant WASH gaps, including inadequate access to clean water, sanitation facilities, and handwashing infrastructure, increasing infection risks. These conditions highlighted the importance of integrating WASH interventions with health programming to reduce disease transmission.

Limited Community Awareness and Health-Seeking Behavior

Community awareness of disease prevention, hygiene practices, and available health services remained low in many target areas. Misconceptions about illness and reliance on traditional practices often delayed timely healthcare seeking.

Risk communication systems were weak, and access to reliable health information—particularly regarding emerging threats such as Ebola—was limited. This emphasized the importance of community engagement and health promotion as central components of HADO’s intervention.

Interconnected Vulnerabilities and Need for Integrated Response

The challenges experienced in 2022 were highly interconnected. Weak health systems, inadequate WASH services, malnutrition, and low community awareness collectively contributed to increased morbidity and mortality risks.

For example:

- Poor sanitation contributed to higher disease incidence, which in turn exacerbated malnutrition
- Limited access to healthcare delayed treatment and increased severity of illness
- Low awareness reduced adoption of preventive health and hygiene practices

Recognizing these linkages, HADO adopted an integrated Health, Nutrition, and WASH approach. This ensured that interventions addressed multiple vulnerabilities simultaneously, resulting in more effective, efficient, and sustainable outcomes for affected populations.

4. Programme Achievements

4.1 Health and Nutrition

In 2022, HADO implemented an integrated health and nutrition response targeting vulnerable populations across Central Equatoria State.

Through static and mobile clinics, the organization delivered essential primary healthcare services, reaching over 6,000 beneficiaries with outpatient consultations, diagnosis, and treatment of common illnesses.

Nutrition services included screening for malnutrition among children and support for early identification and referral of severe cases. These interventions contributed to improved health outcomes and reduced risks associated with untreated illnesses and malnutrition.

A key achievement was the training of over 50 health workers on Infection Prevention and Control (IPC) using Ministry of Health–approved modules. This strengthened the capacity of frontline health workers to prevent and manage infectious diseases, improving the overall quality of healthcare services.

4.2 Water, Sanitation, and Hygiene (WASH)

WASH interventions were integrated into the emergency response to address the link between poor sanitation and disease transmission. HADO supported hygiene promotion and community awareness activities, reaching over 18,500 individuals with key messages on disease prevention, safe hygiene practices, and infection control. These efforts contributed to improved community knowledge and adoption of preventive practices, reducing the risk of communicable diseases.

4.3 Disease Prevention and Emergency Response

In response to the risk of Ebola Virus Disease (EVD) and other infectious diseases, HADO implemented targeted disease prevention interventions in collaboration with the State Ministry of Health and the World Health Organization (WHO). The project distributed over 1,000 EVD kits to support infection prevention efforts at both community and health facility levels. In addition, risk communication and community engagement activities were conducted to raise awareness about disease transmission and prevention. Referral pathways were established and strengthened to ensure that patients requiring specialized care could access appropriate services in a timely manner. These interventions enhanced preparedness and response capacity, contributing to reduced risk of disease outbreaks.

4.4 Cross-Cutting Approaches

HADO integrated key cross-cutting approaches across all interventions in 2022:

- **Community Engagement:** Active involvement of community members and leaders in awareness campaigns and service delivery
- **Capacity Building:** Strengthening skills of health workers and local structures
- **Gender Inclusion:** Ensuring equitable access to services for women, men, and vulnerable groups
- **Resilience Building:** Promoting knowledge and practices that enhance community ability to respond to health risks.

5. Partnerships and Collaboration

In 2022, Human Appeal Development Organization (HADO) significantly strengthened its partnerships and collaborative efforts to enhance the effectiveness and reach of its health interventions. The organization worked in close coordination with the State Ministry of Health and the World Health Organization (WHO), ensuring that all programmes were fully aligned with national health strategies, policies, and global best practices. This alignment not only reinforced the relevance of HADO's interventions but also supported the standardization of service delivery across targeted areas.

Through these strategic partnerships, HADO was able to build and strengthen technical capacity among its staff and frontline health workers. Joint planning sessions, technical guidance, and capacity-building initiatives—such as trainings, mentorship, and supportive supervision—contributed to improved quality of care and more efficient programme implementation. In addition, collaboration with these partners facilitated timely access to essential resources, including training materials, medical supplies, and emergency response kits, which were critical in addressing urgent health needs.

HADO also placed strong emphasis on coordination mechanisms, actively participating in health cluster meetings and other coordination forums. This engagement improved information sharing, reduced duplication of efforts, and ensured a more cohesive response among humanitarian and development actors.

At the community level, HADO worked closely with local authorities, traditional leaders, and community-based structures to foster trust, ownership, and sustainability of interventions. These collaborations played a key role in effective community mobilization, increasing awareness of health services, and encouraging active participation in programmes. By leveraging local knowledge and leadership, HADO was able to tailor its interventions to the specific needs and cultural contexts of the communities it served, ultimately improving programme outcomes and impact.

6. Organizational Capacity and Growth

During 2022, Human Appeal Development Organization (HADO) continued to make deliberate investments in strengthening its operational and technical capacity to deliver timely, high-quality emergency interventions in complex and resource-constrained environments. Recognizing the dynamic nature of humanitarian needs, the organization focused on building flexible systems and skilled teams capable of responding rapidly to emerging crises while maintaining continuity of essential services.

A key area of growth was the enhancement of HADO's mobile service delivery models. The organization improved its ability to deploy mobile health teams to hard-to-reach and underserved communities, ensuring that vulnerable populations could access critical services despite logistical and security challenges. This included strengthening planning processes, improving field coordination, and optimizing the use of available resources to maximize coverage and efficiency.

HADO also reinforced its internal systems for programme management, coordination, and monitoring. Greater emphasis was placed on integrated programming approaches, allowing the organization to deliver complementary services—such as health, nutrition, and community outreach—in a more holistic and impactful manner. Improved coordination with partners and stakeholders further enhanced the organization's ability to align interventions, share information, and contribute effectively to broader humanitarian response efforts.

Staff capacity development remained a central priority throughout the year. HADO invested in targeted training, on-the-job learning, and mentorship to equip its personnel with the skills required for emergency response, health service delivery, and community engagement. Field staff gained practical experience in managing outbreaks, delivering primary healthcare services, and conducting risk communication and community mobilization activities. These efforts contributed to a more competent, confident, and responsive workforce.

In addition, the organization strengthened its operational support functions, including logistics, procurement, and administrative systems, to ensure that programme teams were adequately supported in the field. This contributed to more efficient supply chain management and improved the timely delivery of essential supplies and services.

Overall, these capacity-building efforts positioned HADO for sustainable growth and increased impact. The progress made in 2022 laid a strong foundation for scaling up operations, expanding geographic coverage, and deepening programme integration in subsequent years, enabling the organization to better serve vulnerable communities in times of need.

7. Challenges and Lessons Learned

7.1 Challenges

During 2022, HADO operated in a highly complex and resource-constrained environment, where multiple operational and contextual challenges affected programme implementation and service delivery.

Limited access to hard-to-reach areas due to poor infrastructure

Many of the targeted locations, including Wonduruba and surrounding payams, were characterized by poor road networks, which became largely impassable during the rainy season. This significantly constrained the movement of staff, transportation of medical supplies, and regular supervision of field activities. In some cases, delays in reaching communities affected the timeliness of service delivery and limited the frequency of mobile clinic outreach.

Shortage of healthcare resources and supplies

Health facilities and mobile teams faced persistent shortages of essential medicines, diagnostic tools, and medical supplies. This was compounded by weak supply chain systems and limited availability of trained health personnel in rural areas. As a result, the ability to meet the full range of healthcare needs was sometimes constrained, particularly in managing more complex cases requiring specialized care.

High disease burden and risk of outbreaks

Communities in the project areas experienced a high prevalence of communicable diseases, including malaria, respiratory infections, and diarrheal illnesses. The risk of outbreaks, particularly Ebola Virus Disease (EVD), placed additional pressure on already fragile health systems. Limited infection prevention and control (IPC) infrastructure and low community awareness further heightened vulnerability to disease transmission.

Logistical constraints in emergency response delivery

The delivery of emergency interventions was affected by logistical challenges, including high transportation costs, limited availability of vehicles, fuel constraints, and difficulties in transporting supplies over long distances. Coordination of mobile clinic operations across dispersed locations also required significant logistical planning and resources, which at times stretched operational capacity.

7.2 Lessons Learned

Despite these challenges, the implementation of the 2022 response generated important lessons that continue to inform HADO's programming approach.

Integrated health, nutrition, and WASH approaches improve outcomes

HADO observed that addressing health, nutrition, and WASH needs simultaneously resulted in more effective and sustainable outcomes. For example, combining treatment services with hygiene promotion and nutrition screening helped reduce disease incidence while improving overall community health. This reinforced the importance of integrated programming in addressing interconnected vulnerabilities.

Mobile clinics are effective in reaching underserved populations

The use of mobile clinics proved to be a highly effective strategy for delivering services to remote and underserved communities. This approach enabled HADO to overcome access barriers and provide essential healthcare services directly to populations with limited or no access to fixed health facilities. Mobile outreach also increased service coverage and improved early detection of health and nutrition issues.

Community awareness is critical for disease prevention

Health promotion and risk communication activities played a crucial role in improving community knowledge and behavior related to disease prevention. Increased awareness contributed to better hygiene practices, early care-seeking behavior, and reduced stigma associated with certain diseases. This highlighted the need to prioritize community engagement as a core component of health interventions.

Capacity building of health workers strengthens system resilience

Training of health workers on Infection Prevention and Control (IPC) significantly improved their ability to manage health risks and deliver quality services. Strengthening local capacity not only enhanced immediate response efforts but also contributed to longer-term resilience within the health system. This demonstrated the value of investing in human resources alongside service delivery.

11. Future Outlook

Building on the achievements and lessons of 2022, Human Appeal Development Organization (HADO) is committed to expanding its programming scope and deepening its impact through a more comprehensive, integrated, and context-responsive approach. The organization recognizes that addressing complex humanitarian needs requires moving beyond single-sector interventions toward strategies that simultaneously tackle immediate needs and the underlying drivers of vulnerability.

A key strategic priority for HADO is the expansion of multi-sectoral programming. In the coming years, the organization aims to incorporate additional sectors such as food security and livelihoods, protection, education, and peacebuilding into its portfolio. By doing so, HADO seeks to support households not only in meeting their basic needs but also in rebuilding their livelihoods, improving social cohesion, and enhancing long-term stability. This integrated approach will enable the organization to address root causes of vulnerability—such as poverty, displacement, and limited access to services—while continuing to provide timely humanitarian assistance.

In the health sector, HADO will continue to strengthen health systems with a focus on improving equitable access to quality primary healthcare services. This will include expanding mobile outreach services to reach remote and underserved populations, enhancing infection prevention and control (IPC) capacity at health facilities and community levels, and supporting disease surveillance and early warning systems. The organization also plans to increase its focus on maternal, newborn, and child health, as well as preventive services such as immunization and health education. Greater emphasis will be placed on nutrition-sensitive interventions, integrating nutrition screening, referral, and treatment into broader health and community-based programmes to address both the immediate and underlying causes of malnutrition.

Within the water, sanitation, and hygiene (WASH) sector, HADO aims to improve sustainable access to safe and reliable water sources and sanitation facilities in target communities. The organization will scale up hygiene promotion activities, including behavior change communication and community-led total sanitation approaches, to reduce the prevalence of waterborne diseases and improve overall public health outcomes. Efforts will also focus on strengthening community management of WASH infrastructure to ensure long-term functionality and ownership.

HADO also plans to invest significantly in community resilience and capacity building. This includes empowering local governance structures, health workers, and community leaders with the knowledge, tools, and resources needed to sustain interventions and effectively respond to future shocks. By strengthening local systems and promoting community ownership, the organization aims to ensure that gains achieved through its programmes are durable and scalable.

Partnerships will remain central to HADO's future strategy. The organization will continue to strengthen collaboration with government institutions, UN agencies, non-governmental organizations, and community-based actors to enhance coordination, leverage resources, and maximize impact. Through these partnerships, HADO will contribute to broader humanitarian and development efforts while ensuring alignment with national priorities and global standards.

Overall, HADO's future programming will prioritize integration, sustainability, and community ownership. By adopting a holistic and forward-looking approach, the organization aims to contribute not only to immediate humanitarian outcomes but also to long-term development goals, enabling vulnerable communities to achieve improved health, resilience, and self-reliance.

12. Conclusion

HADO's 2022 emergency response demonstrates a strong commitment to delivering life-saving and impactful interventions in a highly challenging humanitarian context. Despite operational constraints such as limited infrastructure, access challenges, and resource limitations, the organization successfully reached vulnerable populations with essential health, nutrition, and WASH services. These efforts significantly improved access to care, strengthened disease prevention and control measures, and contributed to better health outcomes across targeted communities.

Through the adoption of integrated programming approaches, HADO was able to address multiple needs simultaneously, ensuring that beneficiaries received comprehensive support. The use of mobile service delivery models enabled the organization to reach hard-to-access areas, while strong community engagement ensured that interventions were culturally appropriate, widely accepted, and effectively utilized. This combination of strategies enhanced both immediate results and the longer-term resilience of communities.

Partnerships played a critical role in the success of HADO's interventions. Collaboration with government authorities, international agencies, and local stakeholders strengthened coordination, improved resource mobilization, and ensured alignment with national and global priorities. These partnerships not only enhanced the efficiency and effectiveness of programme delivery but also contributed to capacity building at both institutional and community levels.

The experiences and lessons learned from 2022 have further clarified HADO's strategic direction. They underscore the importance of integrated, flexible, and community-centered approaches, as well as the need for continued investment in organizational and local capacity. These insights will guide the organization in refining its interventions and scaling up its impact in the years ahead.

As HADO moves forward, it remains firmly committed to expanding its reach, strengthening systems, and supporting vulnerable communities across South Sudan. By prioritizing sustainability, resilience, and local ownership, the organization aims to contribute to lasting improvements in health, well-being, and self-reliance, ultimately helping communities to better withstand future shocks and build a more stable and prosperous future.