



Specialised treatment needed for refugees injured in fighting

The forced migration of a large number of South Sudanese has seen over one million refugees seek safety in West Nile, Uganda. The fighting in South Sudan that broke out in December 2013 between government forces loyal to President Salva Kiir and the former vice-president, Dr Riek Machar, left many needy and vulnerable. For the next one month, *New Vision* will publish articles to highlight the plight of refugees under the campaign *Be Your Brother's Keeper* to encourage Ugandans to support refugees in all ways possible.

By John Dzizima

As the war raged on, some got caught in the crossfire and were shot at, while others were involved in the actual combat, sustaining injuries as a result.

Hundreds of South Sudanese refugees in Adjumani district fleeing the conflict back home arrive in Uganda with gory injuries, some with bullets still lodged in their bodies.

And because of the large number of refugees entering the West Nile region, coupled with the already overwhelming demands from locals, hitherto existing health facilities have been overstretched.

Adjumani General Hospital, originally a 100-bed facility, is having to cope with up to 400 patients after the influx of refugees.

Besides, some of the war-related injuries that the refugee community presents are so complex that the existing health facilities in the region cannot handle them.

Faced with such challenges, the refugees are resigning to fate, with some rotting away with their injuries in various settlements across the district.

Among them is Jackline Loria, 45, a South Sudanese businesswoman, whose left hand is paralysed because of a bullet still lodged in her back.

The day she was shot, the wagon that Loria and other traders were travelling in was ambushed by unknown gunmen at a place called Lebeling on the Nimule-Juba highway.

"Many people got injured. I can't say how many because I had already been shot in the hand. I was already in pain," Loria recounts the events of the day she was shot and injured.

Loria says many of her colleagues died that day.

"When I regained consciousness, I was at Nimule Hospital with two bullets in my body – one in the left arm and another in my back," Loria says.

She says the victims of the attack were only given basic treatment because the medics there were also on their way to Uganda and lacked critical supplies for treatment.

The dreadful incident left Loria unable to walk on her own. She was transported to the Elegu border town



A South Sudanese woman cares for a relative injured in the conflict. Most of them have injuries from bullets and landmines.

Conflict timeline

2013	President Salva Kiir fires his entire cabinet, including vice-president Riek Machar. Violence erupts and fighting breaks out between government forces and soldiers loyal to Machar.
2014	The South Sudanese government and Machar's forces sign a ceasefire deal.
2016	President Kiir reinstates Machar as vice-president as part of a deal to end the civil war. He is sworn in in April. In July, fighting breaks out between government forces and soldiers loyal to Machar. Hundreds are left dead, and Machar flees the country. He is sacked again and replaced by Taban Deng Gai.
2017	The United Nations High Commissioner for Refugees says the number of refugees who have fled South Sudan tops 1.5 million.

refugee reception centre, where she was registered in the category of persons with special needs.

Loria and her 15-member extended family, all under her care before the incident, were resettled in Majji-II Refugee Settlement. With no hope of getting treated, she remained bedridden for another two years. "I could not walk, so I had to lie

down all the time," she says.

Loria got lucky in late 2017, when the Refugee Law Project of the School of Law at Makerere University, started screening refugees with war-related injuries, so they could be taken for specialised treatment.

She was screened along with 778 others and selected among 252 people recommended for specialised treatment at St. Marys Hospital Lacor in Gulu district and Mulago Hospital in Kampala.

Margaret Atim, a project officer with the Refugee Law Project, says out of the 252 refugees with injuries, they have so far managed to get treatment for 90 clients.

"Those who received treatment have been able to get back to life and support their families. Those who could not before, can now walk. Others said they had not been able to sleep because of the pain, but after getting treatment, they can now rest," Atim says.

"We have signed a memorandum of understanding with Lacor Hospital to implement this pilot project," Atim says.

This is also because the local hospitals in the West Nile region do not have the capacity to handle some of the more serious injuries.

Carolina Kade, a representative of persons with disabilities on the Refugee Welfare Committee of Majji-II Settlement, says they have enrolled 1,000 members into the group, of which 70% have war-related disabilities.

Kade says some of their members are living with HIV and Hepatitis B, further exacerbating their daily agony.

"My children have dropped out of school. They are all here in the settlement with no future because of my disability," Kade says.

In Nyumanzi Settlement,

Atem Akoch, the chairperson of the Refugee Welfare Committee, says they have people whose limbs were cut and need help.

Atem, a returnee from Australia after the comprehensive peace agreement of 2005, said before the 2013 war broke out, he was running a community-based organisation called South Sudanese Amputees Association.

"We even have children who have bullets lodged in their bodies. They need to get treatment," he says.

Atem says some refugees were injured by landmines on their way to Uganda.

According to the Refugee Law Project, they have also made 55 referrals of refugees who urgently need psychosocial support to TPO, a UN agency that supports refugees with psychosocial needs.

Others with other ailments like malaria and Hepatitis B have been handed over to Medical Teams

International management, for

REHOPE rekindling hope United Nations High Commissioner for Refugees (UNHCR), through a programme dubbed Refugee Host Community Empowerment Project (REHOPE), is plugging the gap that exists in the medical facilities.

Through the REHOPE project, UNHCR is improving the capacity of the local hospital in the refugee-hosting districts of West Nile.

They have established facilities that attract critical cadres in overstretched health centres by providing them with specialised equipment.

Elena D'urzo, the UNHCR associate external relations officer officiating at the hand over of a staff house at Adjumani General Hospital, said the project would benefit both refugees and host communities.

"This facility will house a surgeon and definitely, having a surgeon based here for the hospital is very crucial," D'urzo said.

George Bhoka, the Adjumani district health officer, while speaking at the event, said the general surgeon would not only serve the host community, but also the refugees.

"Availability of decent accommodation will help attract critical staff and improve service delivery," Bhoka said.



Loria was shot in the arm and in the back.