

South Sudan
Presentation to the
NEAPACOH Meeting

Kampala
June 28th –July 1st . 2016

Overview: SDGs and South Sudan Development Aspirations South Sudan SDGs

Development Plan

National Pillar #4:

and Community

Sovereignty and

and uphold the

transparent,

freedoms.

accountable and

and fundamental

respect human rights

territorial integrity,

resurgence of conflict

security

Objective:

prevent the

Conflict prevention

Ensure healthy lives and promote well-being for all at all ages

Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

Achieve gender equality and

constitution by empower all women and girls providing equitable access to justice and Promote sustained, inclusive and maintaining law and sustainable economic growth, full and order through institutions which are

productive employment and decent work for all Promote peaceful and inclusive

build effective, accountable and

societies for sustainable development, provide access to justice for all and

Objective: To build a democratic, transparent, and accountable Government, managed by a professional and committed

National Pillar #3: Social

Objective: To promote the

progressively accelerating

universal access to basic

social services.

Governance

National Pillar #1:

well-being and dignity of all

the people of South Sudan by

and Human Development

effective balance of power among the executive, legislative and judicial branches of Government.

public service, with an

National Pillar #2: **Economic Development**

Objective: Diversified private

sector-led economic growth

and sustainable development which improves livelihoods and

raducas navartu

Core indicators related to MI Total Population of South Sudan (Fomale 19%)

11.63 million (2013)	Males 52%)	

2.75 million Total Number of Women of Reproductive Age

Group (25% TP) 441,829 Estimated number of births per Year (with 22,507)

of these being from adolescent girls) 88,366

Estimated number of Births requiring any form of EMOC services (5-15% number of birth/year)

22,092 Estimated no of deliveries requiring C/S (5%)

Health Status

- Maternal Mortality Ratio = 2054*/100,000 live births (estimated to have declined to just below 1000/100,000 live births – survey preparation underway)
- **□** % of Delivery Assisted by any Skilled Attendants = 17%
- ☐ Delivery Assistance: Nurses and Midwives = 17.5%
- ☐ Delivery Assistance: Doctor = 4.3%
- ☐ Home Delivery = 86.9%
- □ Total Fertility Rate = Urban (5.0) Rural (6.7)
- ☐ Contraceptive Prevalence Rate (CPR) = 4.7%
- **☐** Women 15-49 who heard about contraception 19.7%
- **☐** Women 15-49 ever users of contraception = 12.6%

Health Status

- ☐ Infant Mortality Rate = 84/1000
- **☐** Under-5 Mortality Rate = 106/1000
- ☐ Skilled Personnel (Doctors and Nurse/Midwives) per 10,000 population
 - ☐ South Sudan = 0.15 doctors and 0.2Nurse/midwife
 - ☐ Sub-Saharan Africa = 2 doctors and 11Nurse/midwife
- □ Caesarean section rate (Good indicator of CEmONC)
 - □ 0.5% (at Juba, Malakal, Wau Teaching Hospitals)

Planned Activities after the 2014/2015 Kampala Meeting

Objective: To have increased awareness on RH/FP among policy makers & community leaders. e.g. traditional Leaders. In 2013/2014 no implementation due to political crisis in the country. □ Conduct National KAP baseline. Organize sensitization workshop for National legislature and Executive. ■ National Family Planning conference Conduct a follow-up KAP survey ■ Membership of African Network of **Parliamentarians**

Achievements

- National KAP Study on FP was conducted 2015
- Sensitization on national parliamentarian on RH with emphasis on Maternal Death Surveillance and Response (MDSR) was conducted on 2nd March 2016.
- Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), African Child Right instrument have been rectified by the Parliament and Women & Child Rights are incorporated in transitional constitution (2011)
- National Family Planning conference
 - The preparations are at advance stages and it will take place in August 2016 in Torit town,

Yet to be Done

- □ Organize sensitization workshop for National legislature and Executive - Preparation ongoing
- ☐ Conduct a follow-up KAP survey not yet
- □ Advocacy on increase in the health budget in general and budget line for RH & FP not done due to economic crisis.
- □ Payment for Membership process being finalized

<u>Challenges</u>

- Good Health & Wellbeing
- Quality
 Education
- Gender
 Equality
 - Decent work & Econ. growth
 - Peace, Justice & Strong Institutions

- The civil strife that broke out in the country since December 2013/2014 preoccupied the political class with the search for peace.
- Lack of awareness and resources is impeding efforts to disseminate these initiatives
- No budget line for family planning.
- Low health budget

Good Health & Wellbeing

- Quality
 Education
- Gender
 Equality
- Decent work & Econ.
 growth
 - Peace, Justice & Strong Institutions

Opportunities

- Implementation of elements of the peace agreement related to these goals (a great opportunity to re-look at laws, legislation that have been an impediment to achieving the set RH/FP objectives.)*
- Community engagement*
- Revitalization of the economy*
- Goodwill from development and regional partners (for additional resources and capacity development)



Shukran jazeelan



