

# SOUTH SUDAN SD

#### General data

POPULATION, 2023 11,088,796

PHYSICIANS/1000 INH, 2020-2022

0.05

NURSES/1000 INH, 2020-2022

0.71

LIFE EXPECTANCY, 2022

57.85

#### Socioeconomic data

COUNTRY INCOME LEVEL, 2022

#### Lowincome

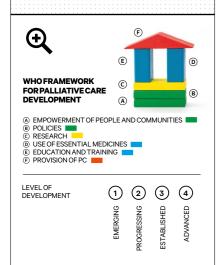
HUMAN DEVELOPMENT INDEX RANKING, 2023 191

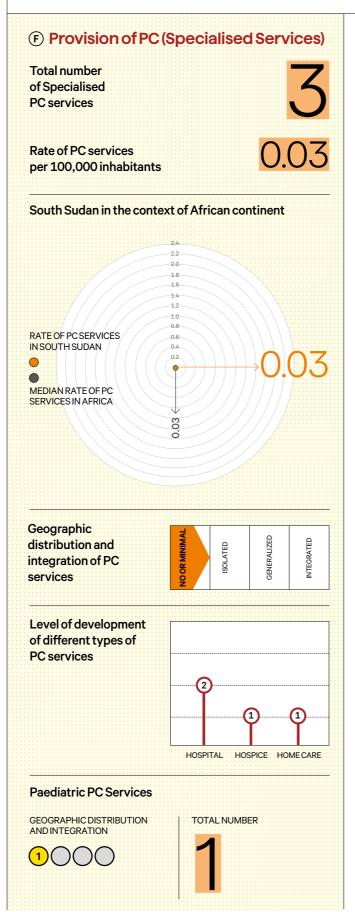
GDP PER CAPITA (US\$), 2023

HEALTH EXPENDITURE, 2021

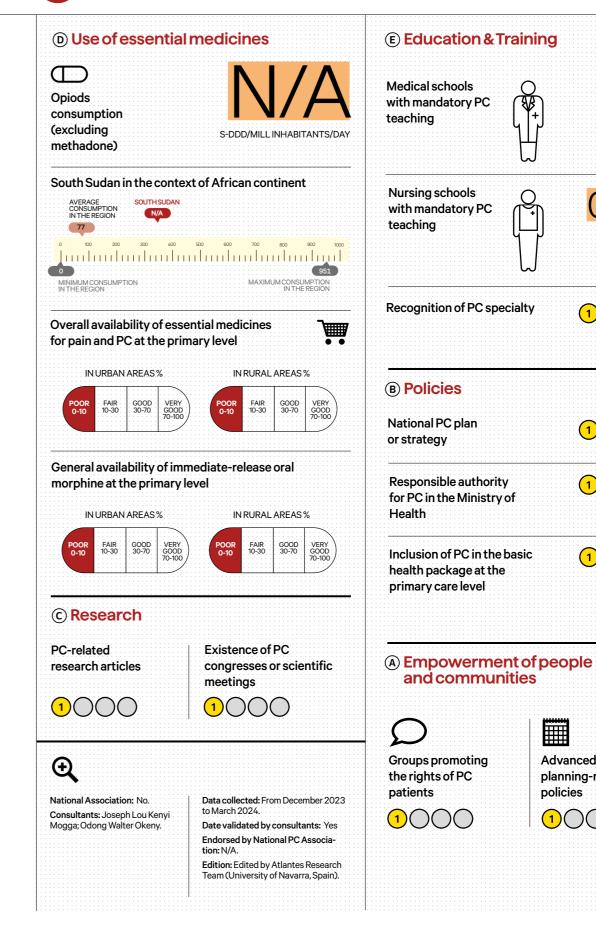
32.68

UNIVERSAL HEALTH COVERAGE, 2021 34





# **AF** South Sudan



3/3

policies

Advanced care

planning-related

COUNTRY REPORTS COUNTRY REPORTS



## **AF** South Sudan

#### Ind1

Existence of groups dedicated to promoting the rights of patients in need of PC, their caregivers, and disease survivors.



Only isolated activity can be detected.

### Ind2

Is there a national policy or guideline on advance directives or advance care planning?



There is no national policy or guideline on advance care planning.

South Sudan has national guidelines that reference advance care planning elements, particularly in the context of COVID-19 care. According to Afolabi et al. (2021), the guidelines include provisions for sharing information and communication regarding prognosis and goals of care, as well as recommendations on decision-making and patient choice in care. Additionally, they address support for families of patients with severe COVID-19, aligning with African palliative care quality standards. However, these provisions appear to be limited to the COVID-19 context, and broader policies on advance care planning for life-sustaining  $treatments\, or\, end\text{-}of\text{-}life\, care\, are\, not\, explicitly\, mentioned.$ 

## Ind3

3.1. There is a current national PC plan, programme, policy, or strategy.



Do not know or does not exist.

3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.



Not known or does not exist neither standalone nor is included in another national plan.

In South Sudan, there is no standalone national palliative care plan, programme, policy, or strategy with a defined implementation framework. Palliative care is not mentioned in the National Health Policy 2016-2026. However, it is referenced in the Consolidated Clinical Guidelines on Use of Antiretroviral Drugs for HIV Treatment and Prevention, reflecting an effort to integrate palliative care practices into HIV-related healthcare frameworks. This inclusion highlights the importance of symptom management and end-of-life care but remains limited in scope to HIV-specific contexts, without a broader strategy or defined framework for implementation across the health system.

## AF South Sudan

3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.



Do not know or does not exist.

#### Ind4

PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.



Not at all.

#### Ind5

5.1. Is there a national authority for palliative care within the government or the Ministry of Health?



There is no coordinating entity.

5.2. The national authority has concrete functions, budget and staff.



Does not have concrete functions or resources (budget, staff, etc.).



#### Ind6

Existence of congresses or scientific meetings at the national level specifically related to PC.



There are no national congresses or scientific meetings related to palliative care.

## Ind7

Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.



Minimal or nonexistent number of articles published on the subject in that country.

A comprehensive scoping review conducted in March 2023,  $covering \, publications \, from \, 2017 \, onward, \, did \, not \, identify \, any \,$  $peer\text{-}reviewed\ articles\ on\ palliative\ care\ in\ South\ Sudan\ that$ met all the inclusion criteria for this indicator.

#### Ind8

-Reported annual opioid consumption -excluding methadone-in S-DDD per million inhabitants per day.

No Data Reported for South Sudan.

# **AF** South Sudan

#### Ind9

-9.1. Percentage of health facilities at the primary care level in Urban areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.

-9.2. Percentage of health facilities at the primary care level in rural areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.



Poor: Between 0% to 10%.

1000

Poor: Between 0% to 10%.

#### Ind 10

- 10.1. Percentage of health facilities at the primary care level in urban areas that have immediaterelease oral morphine (liquid or tablet).
- -10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).



Poor: Between 0% to 10%.



Poor: Between 0%



#### **Ind 11**

- 11.1. The proportion of medical schools with COMPULSORY teaching in PC (with or without other optional teaching)
- 11.2. The proportion of medical schools with OPTIONAL teaching in PC.
- 11.3. The proportion of nursing schools with COMPULSORY teaching in PC (with or without other optional teaching).
- 11.4. The proportion of nursing schools with OPTIONAL teaching in PC.

3/3



medical schools.

South Sudan has three medical schools: the University of Juba,

the University of Bahr el Ghazal, and the University of Upper Nile. These institutions play a critical role in training the country's healthcare workforce. However, ongoing challenges such as limited infrastructure, insufficient resources, and the impact of political instability affect the consistent functioning of these

0/24

24/24

Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.

**Ind 12** 





There is no process on specialization for palliative care physicians.



## AF South Sudan

#### **Ind13**

- 13.1. There is a system of specialised PC services or teams in the country that has a GEOGRAPH-IC reach and is delivered through different service delivery platforms.
- 13.2. Are available in HOSPITALS (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.
- 13.3. Free-standing **HOSPICES** (including hospices with inpatient beds).
- -13.4. HOME CARE teams (specialised in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.
- 13.5. Total number of specialised PC services or teams in the country.



No or minimal provision of palliative care specialized services or teams exist in the country.



Ad hoc/in some parts of the country.



Not at all.

RATE OF SPECIALISED PC SERVICES/100.000 INH

access to palliative care in the country.



1000 Not at all.



0.03 1 2 3 4 5

Palliative care services in South Sudan are emerging and pri-

South Sudan (PCSS), established in 2018, is a registered char-

ity advocating for palliative care integration into the nation-

al health system. It focuses on improving access to pain relief

life-threatening or life-limiting illnesses. In Bentiu, Médecins

care since 2021, including staff training, clinical guidelines, and

Jubek State, the Women Relief Organisation, with support from

Medair South Sudan, provides paediatric palliative care for chil-

dren living with HIV/AIDS and cancer in rural areas. These ini-

tiatives represent early but important steps toward improving

Sans Frontières (MSF) has offered palliative and end-of-life

documentation systems suited to humanitarian contexts. In

medication and providing holistic support for people with

marily led by NGOs and international partners. Palliative Care



← SPECIALISED

#### Ind14

- 14.1. There is a system of specialised PC services or teams for children in the country that has geographic reach and is delivered through different service delivery platforms.
- -14.2. Number of pediatric specialised PC services or teams in the country.



No or minimal provision of palliative care specialized services or teams for children exists in country.





The Women Relief Organisation, with support from Medair South Sudan, has provided pediatric palliative care services to children and adolescents in rural communities of Jubek State. This initiative has offered treatment to numerous children affected by HIV/AIDS and cancer, aiming to improve their quality of life.

APCA ATLAS OF PALLIATIVE CARE IN AFRICA 2025