

STRATEGIC FOCUS

South Sudan continues to face a prolonged conflict, famine, some of the worst health outcomes in the world. South Sudan's HIV response lags more than a decade behind other neighboring countries.

The Centers for Disease Control and Prevention (CDC) collaborates closely with the Ministry of Health (MOH), South Sudan AIDS Commission, Global Fund, and other key partners to strengthen the fragile health system. Together, this collaborative provides resources and technical assistance in adult and pediatric HIV treatment, HIV/tuberculosis (TB) collaborative activities, prevention of mother-to-child transmission (PMTCT) for all HIV-positive pregnant and lactating women, targeted prevention programming, laboratory strengthening, blood safety, as well as strategic information.

Essential Health Services: CDC, through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), supports HIV prevention and treatment services in the highest prevalence areas of South Sudan, and focuses on increasing service capacity and quality through mentorship, supportive supervision at all treatment sites, and program monitoring. There are eight CDC supported service delivery partners providing facility-level support for the transition to Test and Start as a means to achieving UNAIDS 90-90-90 targets.

Health Systems Strengthening: CDC provides extensive assistance to the MOH in strengthening the health system, including operationalizing the National Public Health Laboratory and National Blood Transfusion Center services, quality assurance and accreditation programs, and strengthening national HIV surveillance systems and health and laboratory management information systems.

KEY ACTIVITIES AND ACCOMPLISHMENTS

Sustained Essential Health Services: Program data indicates CDC directly supports approximately 85% of PMTCT and 70% of HIV treatment programs in the country, including 30% of HIV commodities. Despite access challenges, CDC implementing partners continue to provide HIV testing and treatment support, and have established voluntary medical male circumcision (VMMC) at Juba Military Hospital.

HIV/TB Services: From 2016 to 2017, HIV testing has increased and a greater number of HIV-positives have been diagnosed and are receiving antiretroviral treatment (ART). Key populations (KP) such as men having sex with men (MSM) and female sex workers (FSWs) were reached with HIV prevention services. Through partnerships and coordination between the MOH, CDC and the Global Fund, there was an increase of patients including children, who were provided ART. Those receiving ART increased, from 19,394 HIV-positives in 2016 to 22,700 HIV-positives by June 2017. CDC continues to work with the national TB and HIV programs and other stakeholders to improve TB/HIV collaborative activities to ensure that all TB patients are tested for HIV and that all who test positive are appropriately linked to treatment. All HIV-positives identified at CDC-supported facilities are screened for TB and linked to TB diagnostic and treatment services.

HIV surveys. CDC previously supported three rounds of antenatal clinic (ANC) surveys (2007, 2009 and 2012) and is currently supporting the MOH in collaboration with the Global Fund in conducting the 2017 ANC survey. PEPFAR also supported two bio-behavioral surveys of female sex workers in Juba (2016) and in Nimule (2017).

PEPFAR five-year strategy: CDC led the development of an inter-agency five year PEPFAR strategy that focuses programs on high prevalence areas with targeted activities. The strategy is to strengthen national ownership of the HIV response and activities including HIV testing services, scaling-up Provider Initiated Testing and Counselling, treatment services, PMTCT, prevention among key populations, quality assurance, laboratory systems, and strategic information strengthening.

Key Country Leadership

President:
Salva Kiir Mayardit

Ambassador:
Thomas Hushek

PEPFAR Coordinator:
Sudhir Bunga

CDC Country Director/ DGHT
Program Director/
Public Health Attaché:
Sudhir Bunga

Country Quick Facts

Per Capita GNI:
\$390 (2016)
Population:
12.2 million (2016)

Under-5 Mortality:
91 / 1,000 live births
(2016)

Life Expectancy:
57 years (2016)

Global HIV/AIDS Epidemic

Estimated HIV Prevalence
(Ages 15-49): 2.4%
(2017)

Estimated AIDS Deaths
(Age ≥15): 10,000 (2017)

Estimated Orphans Due
to AIDS: 110,000 (2017)

Reported Number
Receiving Antiretroviral
Therapy (ART) (Age ≥15):
22,700 (2017)

Global Tuberculosis (TB) Epidemic

Estimated TB Incidence:
146 / 100,000 (2016)

TB patients with known
HIV-status who are HIV-
positive: 12% (2016)

TB Treatment Success Rate:
80% (2015)

PEPFAR Country Staff: 8

Locally Employed Staff: 7

Direct Hires: 1

