Statement by WHO Representative at the 3rd National Health Summit of South Sudan

Protocol

I must congratulate the Honorable Minister and all the partners for having the courage to convene this important Health Summit.

At the onset I must say what the Summit is and what it is not: It is not a one-off event, but rather the launching of a process to address the myriad of problems facing South Sudan's health sector today. Secondly, it is not a workshop, but a forum for honest discussions to find solutions. I therefore urge all participants to not only bring issues to the table but to proffer solutions.

Excellences, Ladies and gentlemen,

I will not dwell on the achievements and challenges facing the health sector in South Sudan today. We have the whole week to do that. I will however say the following 4 things:

1. We all agree that health is a human right. We all endorsed that every citizen (child, adult, male, female, young and old) has the right to get whatever health service they need (preventive, curative, promotive, rehabilitative, primary, secondary or tertiary); and wherever they are in a city or village or displaced camp or cattle camp); and it must be of quality; and the person needing the service must not suffer financial catastrophe getting it. This is the ideal we signed at the highest level and it is called Universal Health Coverage.

2. We all know that we are very far from this ideal, and we may not be working towards it. We offer selective and incoherent health services that have not shown a significant impact.
3. We are spending millions of dollars trying to ensure provision of health services, but we are not seeing impact. We may be guessing the reasons why, but we are not sure. This Summit intends to provide a forum for discussing this. However, I will mention one. We are not following the principles of aid effectiveness particularly ownership, harmonization of support and alignment of processes. To achieve ownership, the low and decreasing budgetary allocation must be reversed. The whole government should support the Ministry of Health to lead the health sector through adequate financing.

4. We are following different strategies to achieve the Universal Health Coverage. We call them well known interventions or global approaches. Many are ill suited for the context of South Sudan costly and ineffective, yet we insist on them. We intend at this forum to open the discussion process for harmonizing and contextualizing health services to South Sudan for greater impact to the populations we serve.

Excellences, Ladies and Gentlemen,

To conclude, we have the 3 necessary ingredients: 1) The Honorable Minister of Health and his team are ready to lead the transformation process beginning with this Summit and must be supported by the whole government especially adequate financing. 2) The WHO office in South Sudan has been re-enforced and has lined up backup from our Regional Office and Headquarters and is willing, able and ready to provide the necessary technical guidance. 3) The major partners are willing and ready to support better health outcomes in South Sudan. We must therefore move forward together.

Finally, I would like to acknowledge the support and collaboration of our funding and collaborating partners mainly: the Government of Canada, the US Agency for International Development, European Union, the Government of Japan,
the Gavi Alliance, Global Fund and member of the H6 agencies (UNICEF, UNAIDS, UNFPA, UN Women and World Bank).

Thank you

WHO Country Office South Sudan,