



World Health Organization

HEALTH: KEY TO PEACE AND PROSPERITY SUDAN



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The people of Sudan are not yet healthy enough to benefit fully from opportunities for peace:

- They face high risks of severe illness, disability and death;
- Their child and maternal death rates are among the worst in the world;
- The threat from HIV/AIDS grows each year;
- Millions are in danger due to disease epidemics, such as malaria;
- They are threatened by frequent natural disasters – the latest being the impending drought in Darfur and Kordofan.

Throughout this vast country, health services are seldom available when needed:

- Some communities in some regions are unable to access any care at all;
- They are usually the most vulnerable;
- Women and girls, in particular, have vast unmet health needs;
- Available health services are usually of poor quality;
- Hospitals are ill-equipped and dilapidated;
- Too many doctors and nurses do not stay working in their posts;
- People seeking quality hospital care can end up in debt for the rest of their lives;
- If they fail to recover, the debt passes to their children.

The Comprehensive Peace Agreement (CPA) offers the exciting prospect of recovery and increased prosperity throughout Sudan. To reap its benefits, Sudan's people must survive threats of disease; women must be able to deliver without risking death or disability; and children must be helped through the vulnerable early years through proper health care.

The Government of National Unity, the Government of Southern Sudan and all their partners need sustained support to refashion basic services from the ashes of conflict, mistrust and outright poverty. Well functioning accessible and effective health services are key to recovery. The World Health Organization (WHO) works with all national and international groups working for the life and health of Sudan's people.

The urgent requirement is that health needs are assessed, responses are properly coordinated, and important gaps in service provision are filled. Health workers need training and then support to do their job well. Only then does the successful pursuit of the UN Millennium Development Goals become a realistic possibility. Only then will the people of Sudan be able to expect healthy lives and the chance of sustainable livelihoods.

Good health depends on access to water, on hygiene and sanitation, on shelter and the control of disease, and on access to a small number of essential basic health services. These needs are clearly identified in the 2005 United Nations and Partners Work Plan for the Sudan. They are further elaborated in the report of the Joint Assessment Mission (JAM). A healthy population can contribute to the transition of Sudan from a period of conflict to lasting peace. Populations made insecure by the threat of disease are less able to work for peace and contribute to prosperity.

As the health arm of the United Nations system, WHO provides support that draws on experience of many complex post-conflict situations. WHO will support national authorities and health partners in Sudan as they:

1. Sustain the survival of vulnerable people by tackling promptly threats to human life and health;
2. Ensure the delivery of priority health services across the country, targeting the most under-served areas;
3. Back the transitional and peace-keeping processes;
4. Facilitate the recovery of the health sector, with stronger and decentralized health services in the South and in the North.

These four areas of work will help bridge the gap between humanitarian assistance and recovery and contribute to the objectives set in both the UN Work Plan 2005 and the JAM.

WHO has already scaled up its programmes in Sudan to provide technical support as national and international partners – such as UNICEF, UNFPA and major NGOs – implement strategies for responding to widespread enormous health needs. An expanded WHO field presence is planned, with increased capacity to carry out health assessments, support coordination and encourage effective management of external aid. This expanded presence will increase the capacity for monitoring health needs at local level, and for aligning humanitarian responses with longer term health system development. Initiatives supported through the global campaign to eradicate polio and the global fund to fight AIDS, tuberculosis and malaria will be woven into the unified UN approach led by the Special Representative for the Secretary-General.

The UN Work Plan 2005 and JAM contain ambitious targets for health sector development given the short lifespan of the interim CPA. Yet health must be given priority as experience from elsewhere indicates that sound investments in health are central to creating peace and promoting prosperity through consolidated public systems. WHO has risen to the challenge and calls for a robust and sustained engagement from the donor community.

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