#### PRELIMINARY OBSERVATION

#### SOUTH SUDAN

#### STATUS OF IMPLEMENTATION – VICTIM ASSISTANCE

## COMMITTEE ON VICTIM ASSISTANCE (Burkina Faso, the Netherlands, Slovenia (Chair) and Zambia) Intersessional Meetings 18-20 June 2024

- 1. The Committee welcomes the submission by South Sudan of updated information on its victim assistance activities.
- 2. Based on the information provided, the Committee presents the following preliminary observations.

#### **Mine casualties**

- 3. South Sudan reported 77 casualties in 2023 including 51 killed and 26 injured, showing a significant increase to 40 casualties in 2022 and 38 casualties the year before. South Sudan reported a total of 771 victims registered between 2011 and 2023 in addition to 5,145 victims that were recorded prior to 2011.
- 4. <u>The Committee would welcome further information disaggregation by gender, age, and disability</u> for all mine victims, including indirect victims.

#### VICTIM ASSISTANCE ACTIONS:

Strengthen partnerships and integrate victim assistance into broader national policies, plans and legal frameworks and designation of a government entity to oversee the integration (Action #33 and Actions #1 and #6)

5. South Sudan reported that the Ministry of Gender Child and Social Welfare (MGCSW) is the lead government agency in coordinating victim assistance efforts in the country. In 2023 over 15 coordination meetings were conducted by the Ministry with partners to coordinate efforts on the Convention on the Rights of Persons with Disabilities (CRPD), which is ratified by South Sudan.

# Develop and implement measurable, realistic and time-bound national action plan (Action #33 and also Action #2)

- 6. South Sudan reported that MGCSW, in collaboration with stakeholders, begun drafting a national disability action plan that focuses on advocacy, education, health, rehabilitation, psychosocial support and livelihood, in line with the CRPD.
- 7. <u>The Committee would welcome an update on progress made in drafting of the national</u> disability action plan.

Removing barriers including physical, social, cultural, political, attitudinal and communication barriers to access such services (Action #33)

8. The Committee recalls that South\_Sudan had reported that an assessment was conducted by Humanity & Inclusion (HI) in 2021 to identify barriers to accessing services for persons with disabilities, specifically in accessing reproductive health services, food and livelihood opportunities. South Sudan further reported that , following the assessment, HI supported national partners in developing action plans to remove identified barriers. Additionally, South Sudan reported that HI supported three health facilities in strengthening their accessibility by installing ramps, handrails, widening entrances and paths for wheelchair users in Kator Melekia and Munuki healthcare centres.

# Applying multi-sectoral efforts to ensure that the needs and rights of mine victims are effectively addressed in line with the Convention on the Rights of Persons with Disabilities (Action #34)

- 9. South Sudan reported applying a multi-sectoral approach, with the MGCSW taking an integrated approach and working in close partnerships with relevant stakeholders including and especially the Union of Persons with Disabilities (UPD). South Sudan reported that the Ministry has been working to integrate the needs of mine survivors into various national policies and plans such as mine action strategic plan, development plan and inclusive education plan.
- 10. The Committee recalls that South Sudan had reported that for the first time, the private sector Zain Mobile supported training and capacity building of organisations of persons with disabilities on the use of technologies.

# Establish or strengthen of a centralised database / national information management system (Action 35 and Action #9)

- 11. South Sudan reported that the National Mine Action Authority (NMAA) with support of the UN Mine Action Service (UNMAS) continued to collect data on casualties by mines and other explosive ordnances and the data are shared with relevant ministries.
- 12. South Sudan reported that centralised database does not exist, and lack of a data base hinders the mandate of the MGCSW to follow up with service providers, such as international NGOs. South Sudan also reported that no assessment of mine victims has been conducted due to lack of resources.
- 13. <u>The Committee would welcome information on efforts made to establish a centralised database</u> with capacity to integrate data on mine victims.

### Access to first aid and ongoing emergency medical care (Action #36)

- 14.South Sudan reported that the National Ministry of Health (MOH) continued providing healthcare services, while facing important challenges such as shortages in human capacity, facilities and equipment at the hospitals and healthcare centres. South Sudan reported that lack of health insurance added to the difficulties as not everyone can afford to benefit from private healthcare clinics.
- 15.South Sudan reported that ten states of South Sudan have a hospitals and various health centres situated in every county.
- 16.The Committee recalls that South Sudan reported in 2023 that the MOH developed a national health policy (NHP) 2016-2026 to strengthen the health system and tackle barriers that hinder

delivery of the basic package of health and nutrition services (BPHNS) as well as to improve healthcare efforts in the country. South Sudan's partners such as international NGOs provide the majority of healthcare services, with the ICRC Mobile Surgical Teams delivering emergency healthcare including first aid and evacuation. In Juba, the ICRC supports the Military Hospital running an operating theatre and providing training, surgical materials and medicines, among other assistance the ICRC and other organisations provide.

# 17. <u>The Committee encourages South Sudan to prioritise provision of first aid and other pre-hospital</u> <u>care, given the level of ongoing casualties, to reduce fatalities among new casualties.</u>

### Developing national referral mechanism (Action #37)

- 18.South Sudan reported that the MOH has a national referral mechanism which includes referral to services outside of the country, if necessary, although the funding is limited and only available to a few individuals. South Sudan reported NMAC continued to seek opportunities to develop a referral pathway on information available on how services can be accessed to all persons with disabilities. The mine action partners refer mine victims to services provided by the ICRC.
- 19. The Committee recalls that South Sudan had reported that, with support of HI, a service directory for persons with disabilities was under development, targeting Juba, Bentiu and Yei clusters specifically focussing on access to social and reproductive health services. The Committee would welcome an update in this regard.

#### 20. The Committee would welcome an update on the development of the directory of services.

# Access to rehabilitation services including physiotherapy, assistive devices and occupational therapy (Action #38)

- 21. South Sudan reported on the availability of rehabilitation services which provide various types of rehabilitation services including prostheses, orthoses and mobility devices to hundreds of persons with disabilities including mine victims. South Sudan reported that this support is provided with the support of the International Committee of the Red Cross (ICRC), Humanity & Inclusion (HI), OVCI and CBM. In 2023, the following progress were reported:
  - There is increased in rehabilitation services especially for children born with disability through CBM.
  - 55 children benefited from rehabilitation by OVCI;
  - 650 persons benefited from inclusive education project and assistive devices offered by OVCI, of which 355 were female, 295 were male;
  - 1315 (704 females, 611 male) people including children and adult that received rehabilitation services;
  - 1,642 (910 females, 732 male) benefited from Community Based Inclusive Development; and
  - Light for the World supports the provision of comprehensive Eye Health by promoting good health through prevention of eye problems, quality care practice, rehabilitation, and the availability and use of assistive devices they work within the different state hospital infrastructures.

### Access to psychological and psychosocial services including peer-to-peer support (Action #38)

22. South Sudan reported progress made by organisations such as OVCI and CBM including the followings in 2023:

- 302 (177 females, 125 male) persons were provided with home-based care for psychological services through OVCI. Persons with disabilities are exposed to a stressful and threatening situation that requires assessment and continued counselling;
- Light for the world, CBM and its implementing partner's continued providing mental health services and psychological support within the government hospitals. 502 (277 females, 225 male) persons were provided with home-based care for psychological services; and
- Christian Blind Mission through its partners operate in Juba County and with CBID programs in Urban Juba in 2022 and 2023 they have expanded the humanitarian services in Central equatorial state with the geographical scope of Yei, Kajo-Keji, Lainya, Morobo and Juba, Rokon and DOLLO Payam respectively.
- 23. The Committee recalls that in 2023 South Sudan reported that the Union of Persons with Disabilities, jointly with organisations of persons with disabilities, conducted a pilot assessment on psycho-social impairments to understand the situation in Juba city. South Sudan reported that through this assessment they discovered a lot of cases within the community and provided psychosocial support to the caregivers and referred them for further counselling to the OVCI Rehabilitation Centre, Juba Teaching Hospital and Military Hospital.
- 24. The Committee also recalls that South Sudan had reported that HI provided MHPSS, including peer to peer support, to persons with disabilities in South Sudan. The Committee further recalls that South Sudan had reported that psychological counselling is provided by the three rehabilitation centres and some public hospitals in the capital and regions.
- 25. <u>The Committee encourages South Sudan to integrate peer to peer support in MHPSS efforts and into overall rehabilitation policies and programmes.</u>

### Access to social and economic inclusion services, including in rural and remote areas (Action #39)

- 26.South Sudan reported that CBM continued providing socio-economic support, including economic empowerment support and training on micro credit to 78 women all of whom are parents of children with disabilities.
- 27. The Committee recalls that in 2023 South Sudan reported with support of its partner organisations efforts were made to assist persons with disabilities and mine survivors with their social and economic inclusion. South Sudan reported that a significant number of people were provided with various types of assistance, including 1,000 persons with disabilities provided with unconditional grants by the ICRC to set up small businesses.
- 28. <u>The Committee would welcome further information on endeavours to ensure the continuity of the</u> <u>provision of support and access to social and economic inclusion services to mine victims.</u>

# Taking measure for safety and protection of mine survivors in situations of risks and emergencies (Action #40)

- 29. South Sudan reported that a Technical Support Mechanism Team on Disability Inclusion under Gender Inclusion Task Team (GITT) established in 2023 conduct a review of the Humanitarian Response Plan 2024 and identify gaps for improvement in 2025 and strengthen disability inclusion.
- 30. The Committee recalls that South Sudan reported that it has continued to ensure the safety and protection of all persons with disabilities in situations of risk such as armed conflicts and natural disasters. South Sudan indicated that according to South Sudan's humanitarian response plan

2022 and South Sudan Humanitarian Needs Overview 2022, persons with disabilities are considered key stakeholders, support the identification of needs and participate in decision making.

# Strengthening inclusion and participation of mine victims and their representative organisations in all matters that affect them (Actions #41 and Action #4)

31.South Sudan reported that mine survivors and persons with disabilities, their representative organisations are included in relevant policy and programmes.

### **CROSS-CUTTING ACTIONS:**

# Demonstrate high levels of national ownership, including [...] by making financial and other commitments to implementation (Action #1)

32.<u>The Committee would welcome South Sudan to provide information on national financial</u> <u>commitments made to assist mine victims.</u>

# Ensure that the different needs and perspectives of women, girls, boys and men are considered (Action #3)

33. The Committee recalls that in the past South Sudan reported that gender is included in the national development plan for South Sudan, and it takes into consideration the diverse needs of girls, women, boys and men. The MGCSW is mandated to mainstream gender in accordance with the National Gender Policy Strategic Plan (NAP). South Sudan reported several other efforts concerning gender equality in the country.

#### Challenges in implementation of Victim Assistance Commitments (Action #8)

- 34. South Sudan reported facing challenges in implementing victim assistance, including the followings:
  - Shortages of resources to address all needs of persons with disabilities and mine survivors
  - Public awareness on disabilities and on the rights of persons with disabilities still inadequate to rural areas
  - Majority of persons with disabilities including survivors live in hard-to-reach places according
  - Limited campaign to strengthen an integrated approach
  - MGCSW lacks comprehensive needs assessment/survey data on disability
- 1. <u>The Committee would welcome information on how the international community could be of</u> <u>further support to South Sudan's efforts in fulfilling its victim assistance commitments under the</u> <u>Convention and the OAP.</u>

|         | The Oslo Action Plan country reporting tracker<br>Victim Assistance<br>South Sudan   |      |      |      |      |      |  |  |  |  |
|---------|--|------|------|------|------|------|--|--|--|--|
| Actions | Indicators   | 2020 | 2021 | 2022 | 2023 | 2024 | Additional information request by the Committee  |  |  |  |
| #33     | <ul> <li># States Parties that have designated a government entity to coordinate victim assistance activities</li> <li># States Parties that have national action plans in place containing specific, measurable, achievable, realistic and time to use and related indicates</li> </ul> |      |      |      |      |      | The Committee would welcome an update on progress made in drafting of the national disability action plan.   |  |  |  |
| #34     | time-bound objectives and related indicators<br># States Parties that report that they include mine victims in<br>relevant national policy and support frameworks  |      |      |      |      |      |  |  |  |  |
| #35     | # States Parties that include victims of anti-personnel mines<br>in disability data systems  |      |      |      |      |      | The Committee would welcome information on efforts made to establish a centralised database with capacity to integrate data on mine victims.   |  |  |  |
|         | # States Parties that disaggregate victim data by gender, age and disability   |      |      |      |      |      | The Committee would welcome further information - disaggregation gender, age, and disability – for all mine victims, including indirect victims.   |  |  |  |
| #36     | # States Parties reporting on efforts to ensure an efficient<br>and effective emergency response to mine accidents   |      |      |      |      |      | The Committee encourages South Sudan to prioritise provision of first aid and other pre-hospital care, given the level of ongoing casualties, to reduce fatalities among new casualties. |  |  |  |
| #37     | # States Parties that report having a national referral mechanism  |      |      |      |      |      |  |  |  |  |
|         | # States Parties that report having a directory of services in place   |      |      |      |      |      | The Committee would welcome an update on the development of the directory of services.   |  |  |  |
| #38     | # States Parties reporting on efforts to increase the availability and accessibility of comprehensive rehabilitation services  |      |      |      |      |      |  |  |  |  |
|         | # States Parties reporting on efforts to increase the<br>availability of psychological and psychosocial support<br>services  |      |      |      |      |      |  |  |  |  |
|         | # States Parties that have established peer-to-peer services within their national healthcare system   |      |      |      |      |      | The Committee encourages South Sudan to integrate peer to peer support in MHPSS efforts and into overall rehabilitation policies and programmes.   |  |  |  |
| #39     | # States Parties reporting on efforts to remove barriers to<br>the social and economic inclusion of mine victims   |      |      |      |      |      | The Committee would welcome further information on endeavours to ensure the continuity of the provision of support and access to social and economic inclusion services to mine victims. |  |  |  |

| #40 | # States Parties that report integrating protection of mine<br>survivors in their humanitarian response and preparedness<br>plans   |  |      |        |   |
|-----|---|--|------|--------|---|
| #41 | # States Parties that report that they include victim<br>representatives or their organizations in victim assistance<br>planning at the national and local level  |  |      |        |   |
|     |   |  | CROS | SS-CUT | TING ACTIONS  |
| #1  | <ul> <li># States Parties that report, having included Convention implementation activities in national development plans, poverty reduction strategies, humanitarian response plans and national strategies for the inclusion of persons with disabilities, where appropriate</li> <li>% mine-affected States Parties that report making national financial commitments to the implementation of their obligations under the Convention</li> </ul> |  |      |        | The Committee encourages South Sudan to step up efforts by providing national financial commitments to assist mine victims.   |
| #3  | # mine-affected States Parties that report having evidence-<br>based, costed and time-bound national strategies and work<br>plans in place  |  |      |        |   |
|     | # women in States Parties' delegations attending Convention meetings  |  |      |        |   |
| #8  | # States Parties that prepare their Article 7 reports using the Guide to Reporting  |  |      |        |   |
|     | # States Parties that report on progress and challenges during formal and informal meetings   |  |      |        | The Committee would welcome information on how the international community could be of further support to South Sudan's efforts in fulfilling its victim assistance commitments under the Convention and the OAP. |