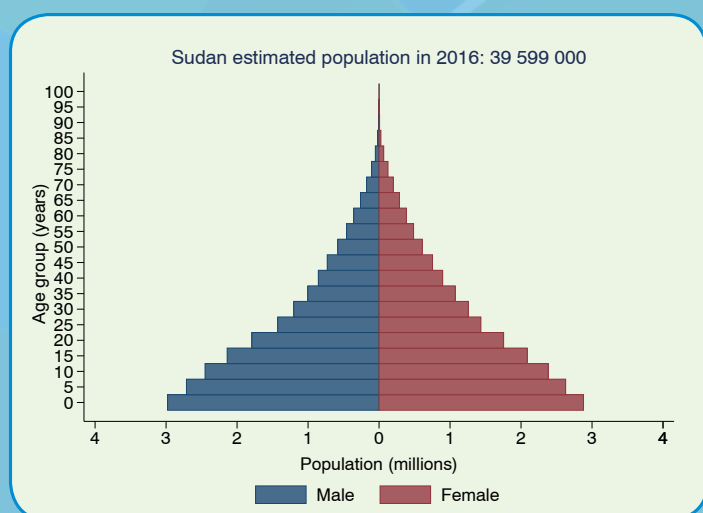




Universal health coverage

Primary health care facilities per 10 000 population (2015)	15.6
Hospital beds per 10 000 population (2015)	67.4
Modern contraceptive prevalence rate (2015)	13
Antenatal care visits (4+ visits)	...
Measles immunization coverage among 1-year olds (%) (2016)	87
Tuberculosis treatment success rate of new bacteriologically confirmed cases (%) (2015)	79
DTP3-containing vaccine / Pentavalent coverage among 1-year olds (%) (2016)	93
General government expenditure on health as % of GDP (2014)	1.8
General government expenditure on health as % of total government expenditure (2014)	11.6

Estimated population in 2016



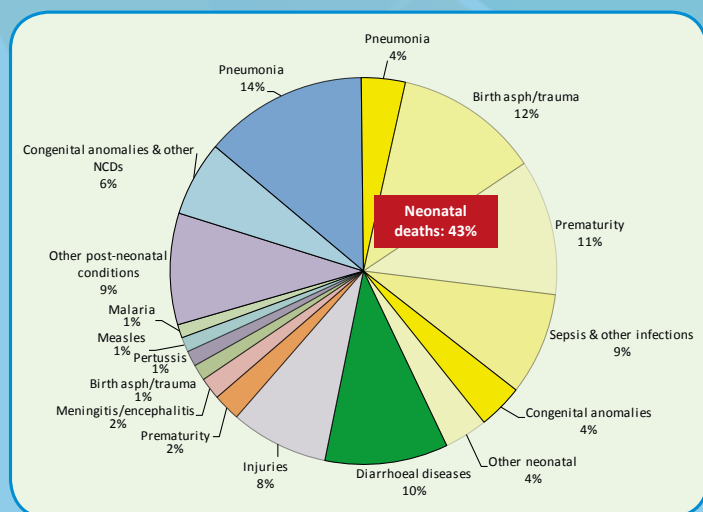
Selected determinants of health

Population living in urban areas (%) (2016)	31
Annual GDP growth (%) (2016)	4.7
Number of refugees ^a (2016)	421 454
Number of internally displaced persons ^b (2016)	2 225 557

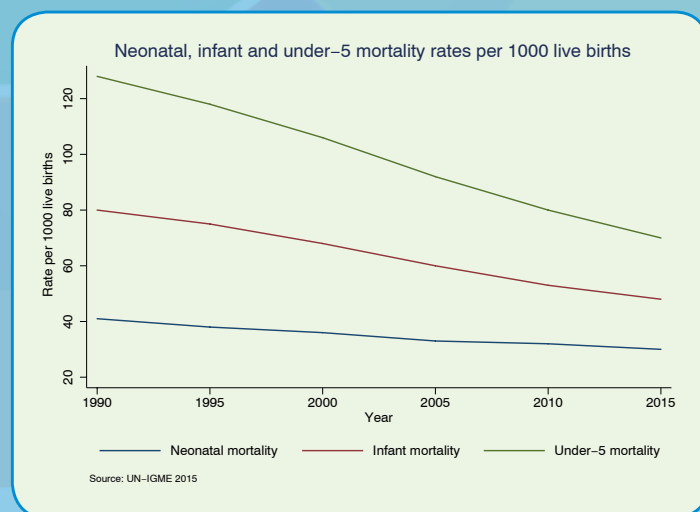
^a Including persons forcibly displaced from their country of origin due to persecution, war, or violence, as recognized and reported by UNHCR.

^b Including persons forcibly displaced due to conflict, remaining in their own country, as recognized and reported by UNHCR.

Distribution of causes of death among children aged <5 years (%)



Neonatal, infant and under-5 mortality rates per 1000 live births



Selected SDGs health-related indicators*

1 NO POVERTY

Population below the international poverty line (2011) % 46.5

Proportion of employed population below the international poverty line (ILO estimate, 2016)

Male %	2.3
Female %	5.3

2 ZERO HUNGER

Children under 5 who are (2014)

stunted	%	38.2
wasted	%	33.0
overweight	%	3.0

4 QUALITY EDUCATION

Literacy rate (15-24 years) (2014)

Total %	60
Male %	...
Female %	...

Net primary school enrolment ratio per 100 school-age children

Total ratio (2014)	76
Male ratio (2011)	65
Female ratio (2011)	59

5 GENDER EQUALITY

Demand for family planning satisfied with modern methods (UN Population Division estimate, 2015) % 35.7

6 CLEAN WATER AND SANITATION

Access to improved drinking water (World Health Statistics, 2013) % 55

Access to improved sanitation facilities (World Health Statistics, 2013) % 24

8 DECENT WORK AND ECONOMIC GROWTH

Unemployment rate (15+ years) (ILO estimate, 2014)

Total %	...
Male %	...
Female %	...

11 SUSTAINABLE CITIES AND COMMUNITIES

Concentrations of fine particulate matter (PM2.5) (WHO/CEHA, 2014)

Total	43.7
Urban	52.7

16 PEACE, JUSTICE AND STRONG INSTITUTIONS

Estimated direct deaths from major conflicts (per 100 000 population) (WHO Global Health Observatory, 2011-2015) 7

*Because of the scarcity of data, the above presentation is limited. Where available, information is obtained from the Regional Core Indicators Programme

Key health indicators

Indicator	Male	Female	Total
Life expectancy at birth in years (2015)	62.4	65.9	64.1
Maternal mortality ratio (deaths per 100 000 live births) (UN-MMEIG 2015 estimate)	—	—	311
Neonatal mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	30
Infant mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	48
Under-five mortality rate (deaths per 1000 live births) (UN-IGME 2015 estimate)	70
Tobacco use among persons 15+ years (%)
Overweight (18+ years) (%) (2014)	27.8
Obesity (18+ years) (%) (2014)	7.5
Raised blood pressure among persons 18+ years (%) (2014)	24.4
Raised blood glucose among persons 18+ years (%) (2014)	10.0
Raised cholesterol among persons 18+ years (%)
Mortality between ages 30 and 70 from cardiovascular disease, cancer, diabetes, chronic respiratory disease per 10 000 (2015)	26
Cancer incidence per 100 000 (2012)	91.1

Universal health coverage (UHC) means provision of quality services to everybody without discrimination of any kind and without exposing people to financial hardship. UHC is one of the targets of Sustainable Development Goal 3, and attaining UHC will also contribute directly or indirectly to achieving the other SDGs. Achieving UHC means ensuring healthy lives and promoting well-being for all at all ages with explicit affirmative action for vulnerable populations including refugees and migrants. Thus, disaggregated data will be necessary to assess and address inequities in health. UHC requires inter-sectoral action. All countries can and must advance towards UHC by year 2030, if not earlier.

3 GOOD HEALTH AND WELL-BEING



ENSURE HEALTHY LIVES
AND PROMOTE WELL-BEING
FOR ALL AT ALL AGES

Voluntary National Review:

Is currently being discussed with UN Resident/Humanitarian Coordinator

National Focal Point for 2030 Agenda:

Secretary General of the National Population Council

National Focal Point in Ministry of Health for health-related SDGs:

Dr Isameldin Mohammed Abdalla, Undersecretary Federal Ministry of Health

1. How is Sudan incorporating the 2030 Agenda into its development policy and planning?

Sudan has endorsed the 2030 Agenda and the SDGs are incorporated in the second National Strategic Plan 2017-2020. The National Population Council in the Ministry of Welfare and Social Security was mandated to coordinate and monitor the national progress towards achieving SDGs at national and sub-national levels, which has recently been moved to the Ministry of International Cooperation. Reportedly, Sudan is planning to submit its Voluntary National Review in 2018.

2. How is Sudan incorporating SDG 3 targets in health policy, strategy, and planning?

Sudan has drafted its National Health Policy (NHP) 2017-2030 in line with the 2030 Agenda to achieve health and health related goals. In addition, health and health related SDGs, including SDG 3, are incorporated in the National Health Sector Strategic Plan (NHSSP) II 2017-2020. The focus of both NHP and NHSSP is to address equity in the health system and respond to the needs of the poor, under served and disadvantaged populations with the theme of "Leaving No One Behind". The NHP 2017-2030 aspires to contribute to Sudan's National Development Vision through effectively responding to health challenges and priority health needs. It is guiding health system reform to re-orient the health system for universal health coverage with focus on promotion of health and wellbeing of Sudanese in line with the SDGs. It needs to be noted that Sudan also has an endorsed document on "Health in All Policies" signed by the President and commitment by all relevant sectors to health.

3. Are there any major partnerships in Sudan for advancing the 2030 Agenda?

The government of Sudan, with the support of its partners, is developing the national framework for the SDGs. The new cabinet established in May 2017 has been actively engaged under the leadership of the First Vice President/Prime Minister, who has been briefed by the UN Resident/Humanitarian Coordinator. The Ministry of International Cooperation has been actively engaging with different UN agencies and other international organization. The Ministry of Health is proposing that the 2030 Agenda for health will be aligned with the Sudan International Health Partnership+ Global Compact .

4. Are there any major partnerships in Sudan for advancing the health-related SDGs?

Several partnerships are underway to advance the health-related SDGs. Sudan is adopting the Health in All Policies (HiAP) approach to enhance the engagement of different sectors to address the determinants of health in a more holistic and comprehensive manner. The HiAP road map has been developed and agreed upon by various stakeholders and different sectors have signed the national commitments to implement HiAP road map.

Furthermore, Sudan has endorsed the IHP+ Global Compact and UHC 2030 Agenda, with partners signing the Sudan Health Compact to support the implementation of the National Health Sector Strategic Plans in line with the principles of Effectiveness of Development Cooperation. In addition, the government has established the Sudan Health Sector Partners forum, in order to coordinate efforts within the health sector.

5. Has Sudan reoriented its National Health Policies, Strategies, and Plans to incorporate Universal Health Coverage?

Universal Health Coverage (UHC) is the key priority of the NHSSP II 2017-2020. Several policies and strategies have been developed to support UHC. These policies and strategies include: Health financing Policy and strategy; Family Health policy; Health in All Policies road map and Global Health Strategy. In addition, the National Health Insurance Law and the National Supply Fund law have been endorsed.