

## PRELIMINARY OBSERVATIONS

### STATUS OF IMPLEMENTATION – SOUTH SUDAN

**COMMITTEE ON VICTIM ASSISTANCE**  
(Algeria, Ecuador, Sweden and Thailand)  
Intersessional Meetings  
22-24 June 2021

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

#### **Mine casualties**

2. The Committee observed that South Sudan reported 57 casualties in 2020. The report stated that a total of 616 direct victims have been recorded between 2011 and 2020, in addition to 5,145 victims that were recorded prior to 2011.
3. The Committee would welcome further disaggregated information on casualties' gender, age, and disability.

#### **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 also Actions #1 and #6)**

4. The Committee observed that South Sudan reported that the Ministry of Gender, Child and Social Welfare (MGCSW) is the entity responsible to oversee the integration of victim assistance into broader national frameworks.

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

5. The Committee observed that South Sudan reported that a national disability action plan has been drafted with support of the European Union, however, due to COVID-19 disruption and the ban on gatherings, the plan has not been approved by the Council of Minister.
6. The Committee would welcome updated information on efforts to ensure approval of the plan.

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

7. The Committee would welcome information on frameworks in place and efforts undertaken to eradicate barriers that may hamper the inclusion and participation of mine victims in South Sudan.

#### **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)**

8. The Committee observed that South Sudan reported that the ratification of the Convention on the Rights of Persons with Disabilities has been underway with two stakeholder meetings having been held with the participation of several ministries, organisations of persons with disabilities and other stakeholders. South Sudan reported that the ratification document has been awaiting approval in the national legislative assembly its approval having suffered further delays due to the COVID-19 pandemic. The reported added that the ratification of the CRPD by South Sudan, will place the country in a better position to make progress and to establish a National Disability Council with mandate to monitor and report on the implementation of all legal framework.
9. The Committee also observed that South Sudan reported that the National Disability and Social Inclusion Policy (2016) continued promoting the rights of persons with disabilities, including landmine survivors, aiming to pave the way for them to live independently and to be included in the community.

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

10. The Committee observed that South Sudan reported that no centralised database for persons with disabilities currently exists and that the MGCSW aims to establish a centralised database to bring together all information related to disabilities and mine survivors that is collected by government or other agencies such as the UNMAS, the ICRC, Humanity and Inclusion and OVCI Ustratuna Children Rehabilitation Centre. The Committee would welcome further information on this effort.

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

11. The Committee observed that South Sudan reported limited healthcare services provided by the government and in a lot of cases by nongovernmental organisations, indicating shortages of emergency response and healthcare services in most places, and the lack of such services in other communities, especially in remote and rural areas where evacuation of casualties is only possible by air.

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

12. The Committee observed that South Sudan reported that there are neither directory of services nor referral mechanisms in place. The Committee would welcome information on how this gap will be addressed to increase mine victims' access to services.

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

13. The Committee observed that South Sudan reported the availability of three rehabilitation centres, including one dedicated to children. South Sudan reported that these centres are operational thanks to the assistance of nongovernmental organisations and that people in need of prosthetics, assistive devices, physiotherapy or counselling are referred to these three rehabilitation centres. The report stated that these and all other services are not sufficient to address the needs and that increase efforts in all areas of victim assistance is necessary.

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

14. The Committee observed that South Sudan reported that psychological counselling is provided by the three rehabilitation centres and some public hospitals in the capital and regions. The Committee also observed that South Sudan reported that landmine survivors and others in rural areas exposed

to a stressful event are taken to prison for protection because they threatening to kill in most cases or tempers to commit suicide and that at the prisons they have no access to drugs and psychological support.

15. The Committee is concerned about this situation reported above and would welcome clarifications as well as information on how South Sudan will to address this challenge.

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

16. The Committee observed that South Sudan reported that the government has prioritised efforts to increase access to healthcare services to promote health, economic productivity and reduce poverty, with currently social and economic opportunities remaining very limited and unemployment among persons with disabilities and mine survivors considered to be disproportionately high.

17. The Committee would welcome further information on specific efforts made to enhance social and economic inclusion of mine victims, including in rural and remote areas in South Sudan.

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

18. The Committee observed that South Sudan reported the inclusion of mine survivors in the country's national humanitarian response and/or disaster mitigation preparedness and management policy and that in 2020, 13 percent of the beneficiaries of humanitarian response were persons with disabilities.

19. The Committee would welcome further information on the number and types of humanitarian services mine survivors have received in 2020.

20. The Committee would also welcome further information on disaster mitigation preparedness and management policy in relation to safety and protection of mine survivors.

21. The Committee would welcome information on any measure undertaken to meet the specific needs of mine survivors in situations of risks and emergencies, such as the COVID-19 crisis.

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

22. The Committee observed that South Sudan reported the inclusion of mine survivors and persons with disabilities and their representative associations in the development process of the disability action plan and in the process of the CRPD ratification.

23. The Committee would welcome further information on the engagements of persons with disabilities and their representative associations in ongoing efforts to implement victim assistance.

**CROSS-CUTTING ACTIONS:**

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

24. The Committee observed that South Sudan reiterated commitments to address challenges hindering victim assistance efforts and continued to make efforts despite shortages of resources and the COVID-19 pandemic.

25. The Committee would welcome information on financial commitments made by the government of South Sudan, such as budgets made available, to assist mine victims.

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

26. The Committee would welcome information on measures in place to ensure gender equality and diversity in victim assistance activities in South Sudan.

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

27. The Committee observed that South Sudan reported facing challenges in implementing victim assistance, such as the followings:

- There is no centralised database on disabilities;
- No need assessment or national survey has been carried out and it is believed that the actual number of mine and other explosive remnants of war's victims are far higher;
- *"The landmine survivors and others in rural areas exposed to a stressful event are taken to prison for protection because they threatening to kill in most cases or tempers to commit suicide. At the prisons they have no access to drugs and psychological support. There is need for more support in these areas";*
- Unemployment rate among persons with disabilities and mine survivors remains (proportionately) high;
- No referral mechanism and directory of services have been developed yet;
- The persons with disabilities who have been trained in business skills or received vocational trainings, have reported that they have not been able to start their income generating business as they don't have access to micro finance because they have no assets to borrow loan; and
- COVID-19 caused delay in approval of the national disability action plan and ratification to the CRPD.

28. 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.