Scaling up human resources for health in South Sudan: A strategic imperative for achieving universal health coverage

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ABSTRACT

South Sudan remains critically underserved in its health workforce, with only 7.6 skilled health workers per 10,000 population—far below the WHOrecommended threshold of 45.5 needed to attain Universal Health Coverage (UHC). This commentary outlines the strategic efforts, led by the Ministry of Health, to close this gap through investments in health worker training, specialist education, and systems strengthening. Over 1,000 mid-level health professionals graduate annually from 37 national training institutes, out of which the United Nations Population Fund (UNFPA) supports 13. In parallel, international postgraduate training programmes in Ethiopia and other countries are building a source of specialised cadres in priority disciplines. To sustain momentum, the Ministry has developed a 10-year Human Resources for Health (HRH) Strategic Plan focused on legislation, education, governance, and retention. Achieving UHC by 2035 will require doubling current training capacity and securing greater financial and technical commitment. This article calls on government leadership and partner alignment to ensure South Sudan builds a resilient, skilled, and equitably distributed health workforce to meet the health needs of her people.

Keywords: Human Resources for Health, Universal Health Coverage, health workforce, strategic planning, health training, health system strengthening, South Sudan

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Introduction

South Sudan faces one of the most acute shortages of skilled health personnel in the region. The current density of core health professionals—doctors, nurses, and midwives—stands at approximately 7.6 per 10,000 population,^[1] far below the World Health Organization's (WHO) recommended threshold of 45.5 per 10,000 required to attain Universal Health Coverage (UHC).^[2] See Table 1. This gap presents a formidable barrier to delivering essential health services and responding to public health emergencies. Addressing it demands a bold, strategic, and sustained investment in the health workforce.

Table 1. Health workforce data for East African countries 20	2018 data ^[1]
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Country	Medical doctors/ 10,000 population	Nursing and midwifery personnel/10,000 population	Dentists/10,000 population	Pharmacists/ 10,000 population	WHO index threshold for doctors, nurses, midwives / 10,000 population
Kenya	1.61	11.991	0.168	0.193	
Uganda	4.14	12.744	0.006	0.078	
Tanzania	0.497	5.498	0.117	0.318	
Rwanda	1.315	11.823	0.182	0.707	44.5/10,000 doctors, nurses and midwives
South Sudan	0.39	7.2	0.036	0.164	naises and iniawives
Somalia	0.395	1.129			
DR Congo	3.622	10.716	0.046	0.194	

Accelerating the production of mid-level health workers

In recent years, the Ministry of Health, with the support of partners, has made commendable efforts to scale up the training of various cadres. Currently, 37 health sciences training institutes (HSTIs) operate nationwide, comprising public, private, and faith-based institutions. With critical support from UNFPA and the Government of Canada, 13 HSTIs receive targeted assistance, graduating over 1,000 mid-level professionals annually. These professionals include nurses, midwives, clinical officers, and allied health workers, all of whom play a crucial role in the healthcare system. While this is a significant achievement, it remains insufficient relative to national needs.

Building a source of specialists through regional partnerships

The Ministry has also prioritised the training of specialised medical professionals. A key initiative is the 'Training Programme for South Sudanese Specialised Health Cadres,' established in collaboration with the Federal Ministry of Health of Ethiopia. This programme supports postgraduate medical education emphasising priority areas such as maternal and child health, surgery, and internal medicine. Currently, 117 South Sudanese doctors are undergoing specialist training in Ethiopia, with over 100 having completed training and returned to contribute within state-level health systems. Additional specialists are being trained in Egypt, Kenya, Tanzania, Uganda, and South Africa.

International Partnerships

In terms of international support for training of healthcare professionals in South Sudan, it is only the UNFPA (United Nations Population Fund) which is consistently supporting the training of nurses, midwives and clinical officers. Other organizations, such as the Japan International Cooperation Agency (JICA), supported the Ministry of Health few years ago in developing policies and related guidelines on management and monitoring of HRH. Other NGOs do sometimes get involved in short term training within the framework of "capacity building" which hardly achieve the intended purpose. The Government of South Sudan must consistently allocate funds to increase capacity and improve quality of training of healthcare professionals at all levels of healthcare service delivery (primary, secondary and tertiary). The current scenario of entirely depending on external support will only postpone meaningful progress towards achieving the UHC. Although the Federal Ministry of Health of Ethiopia do grant 30 slots annually for training South Sudanese doctors at postgraduate level and there are a few training in Kenya, Tanzania, Uganda and South Africa, establishment of postgraduate medical education within the country is the only cost effective and sustainable approach for South Sudan. It is therefore mandatory that the leadership of the Ministry of Health revitalize an (unpublished) initiative which was developed by Dr Eluzai Hakim almost ten years ago for the establishment of postgraduate medical education in the country.

With the implementation of the proposal developed by Dr Eluzai Hakim for postgraduate medical education,

the Republic of South Sudan will be able to influence the existing colleges of training within the region and beyond for expansion and improvement of its postgraduate medical education.

The establishment of postgraduate medical education within the country is a noble task that must be pursued if people of South Sudan are to have to access to quality healthcare services within the country and achieve UHC. The success of postgraduate medical education will depend on provision of adequate and consistent funding of all the key pillars of training, including development and accreditation of selected hospitals for training. It is therefore crucial that the government of the Republic of South Sudan is the primary source of funding, then influence on the good will of the international community to mobilize additional funding for the training. That is the only road for achieving UHC.

Aten-year strategic vision for HRH development

Despite these gains, the path to UHC remains long and uncertain unless investments are significantly scaled up. Projections indicate that South Sudan could meet UHC goals within the next decade but only if the current health workforce training capacity is at least doubled. Otherwise, achieving UHC may be delayed by another two decades—a timeline the country cannot afford.

To guide this acceleration, the Ministry of Health has developed a ten-year Human Resources for Health (HRH) Strategic Plan focused on four priority outcomes:^[3,4]

- 1. Strengthened HRH Legislation, Planning, and Partnerships
- 2. Improved Health Workforce Education and Training
- 3. Enhanced Leadership, Governance, and Management Practices
- 4. Optimised Utilisation, Retention, and Performance of the Health Workforce

The way forward: a call to action

South Sudan's journey towards UHC hinges on a transformative expansion of its health workforce. The government must lead from the front—through policy leadership, increased financing, and institutional stewardship. But this cannot be achieved in isolation. We must galvanise support across the health ecosystem, including development partners, private sector actors, and international academic institutions.

In a country with vast health needs and a limited professional base, investing in human resources is not merely a technical priority—it is a moral imperative. Let this be the decade in which South Sudan closes the health workforce gap and decisively moves toward health for all.

Dr Gabriel Loi is the Director General, Directorate of Training and Professional Development at the Ministry of Health, Republic of South Sudan.

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