Malaria transmission in South Sudan is generally perennial, with moderate to high intensity. The annual reported number of malaria cases in 2013 was 1,855,501 with 1,311 deaths.
Progress
South Sudan has made some progress in scaling-up malaria control interventions. Progress has been made in rolling out Community Case Management of malaria and pneumonia to increase coverage of case management. The country has recently banned oral artemisinin-based monotherapies. The country has secured sufficient resources to achieve universal coverage of LLINs and RDTs in 2015. South Sudan has reduced the under-five mortality rate by 59% since 1990. South Sudan was awarded a 2015 ALMA Award for Most Improved in Malaria Control. South Sudan has recently increased coverage of the tracer MNCH indicator DPT3.

Impact
The annual reported number of malaria cases in 2013 was 1,855,501 with 1,311 deaths.

Key Challenge
- The lack of new resources allocated to malaria in the GF New Funding Model jeopardises the country's ability to sustain the gains made in the fight against malaria.

Previous Key Recommended Actions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
<th>Progress</th>
<th>Comments - key activities/accomplishments since last quarterly report</th>
</tr>
</thead>
<tbody>
<tr>
<td>MNCH¹: Optimise quality of care</td>
<td>Conduct a root cause analysis to identify underlying causes of low-skilled attendants and, based on that analysis, consider increasing the number of midwives and other skilled birth attendants. Increase the number of facilities providing basic medical obstetric care and emergency medical obstetric care. Increase demand through community action</td>
<td>Q4 2013</td>
<td>A root cause analysis identified key reasons for low coverage of SBAs including limited financial resources and a lack of skilled personnel. South Sudan has embarked on an impressive training programme through 11 training institutions. Over 100 midwives have been trained and there are plans to train a total of 1,000 skilled health workers including nurses, midwives and laboratory technicians by the end of 2015. There is also an ongoing plan to strengthen capacity in health facilities and at community level</td>
<td></td>
</tr>
</tbody>
</table>

South Sudan has responded positively to the recommended actions addressing low coverage of PMTCT and the lack of data for postnatal care and continues to track progress as these actions are implemented.

¹ MNCH metrics, recommended actions and response tracked through WHO MCA/IERG
### New Key Recommended Action

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action Item</th>
<th>Suggested completion timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address funding</td>
<td>Work to fill the outstanding gaps required to sustain full coverage of ACTs in 2015</td>
<td>Q1 2016</td>
</tr>
</tbody>
</table>

#### Key
- **Action achieved**
- **Some progress**
- **No progress**
- **Deliverable not yet due**