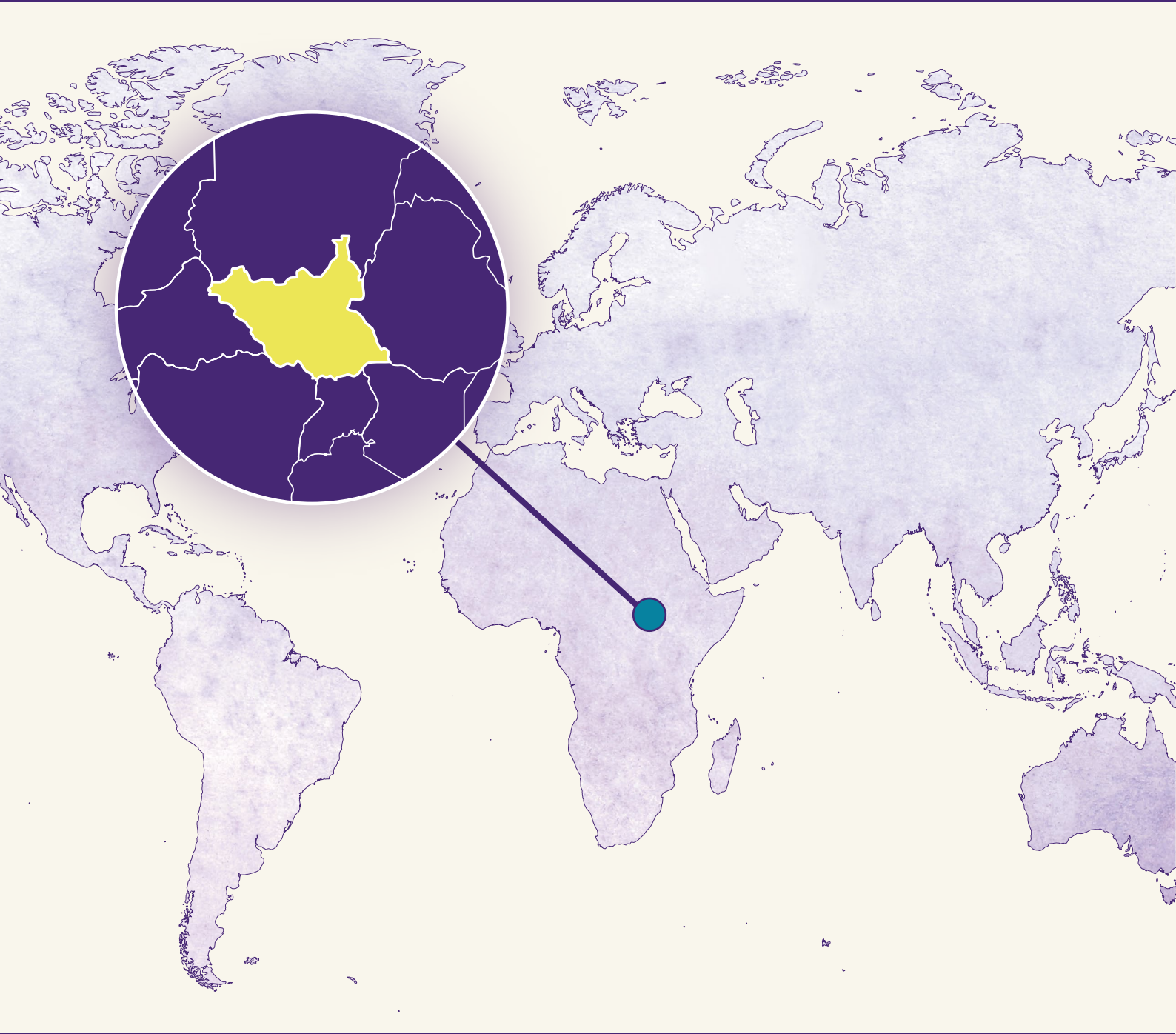


SOUTH SUDAN

Violence Against Health Care in Conflict 2025



**SAFEGUARDING
HEALTH
IN CONFLICT**



**Insecurity
Insight**
Data on People in Danger



REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS				
 REPORTED INCIDENTS	 INCIDENTS WHERE HEALTH FACILITIES WERE DAMAGED/ DESTROYED	 INCIDENTS WHERE HEALTH SUPPLIES WERE LOOTED	 HEALTH WORKERS KILLED	 HEALTH WORKERS KIDNAPPED
2025				
31	5	7	5	4
2024				
7	0	1	2	5
2023				
13	0	2	6	0

Source: Insecurity Insight for the SHCC.

OVERVIEW

Using data collected by Insecurity Insight, the Safeguarding Health in Conflict Coalition (SHCC) identified 31 incidents of violence against or obstruction of health care in South Sudan in 2025, compared to seven in 2024 and 13 in 2023.¹ In 2025, five health workers were killed and four kidnapped, while health facilities were damaged or destroyed on five occasions and medical supplies looted on seven occasions.

Methodology and sources

Information on incidents of violence against health care in South Sudan is compiled from open sources, information projects and aid agency data-sharing mechanisms. Data is continuously updated and numbers may change if new information is made publicly available. For the latest available figures, see Insecurity Insight’s [global map](#) on attacks on health care. See [Methodology](#) for further information.

THE CONTEXT

In 2025, non-international armed conflict intensified in South Sudan, primarily involving the South Sudan People’s Defence Forces (SSPDF), Sudan People’s Liberation Movement/Army-in-Opposition (SPLM/A-IO) and National Salvation Front (NAS).



The Uganda People's Defence Force, which has been present in South Sudan since June 2024, formally deployed troops and conducted joint air-ground operations with the SSPDF. Intercommunal violence fueled by ethnic tensions and competition over resources affected Eastern Equatoria, Jonglei, Lakes, Unity, and Warrap states. The mandate of the UN Mission in South Sudan (UNMISS) was extended to April 2026 to protect civilians and support durable peace.

Approximately 9.3 million people were in need of humanitarian assistance in South Sudan in 2025. Communities across the country faced compounded challenges from climate change and economic pressures. From June 2025, severe flooding caused widespread displacement and infrastructure damage, while flood-affected areas saw rising health risks, including malaria, acute respiratory infections, and diarrhea, as well as a resurgence of cholera.

High levels of cross-border migration between Sudan and South Sudan were recorded in 2025, driven largely by violence associated with the conflict in Sudan, including sexual and gender-based violence (SGBV). By the end of August 2025, the UN refugee agency (UNHCR) recorded 1.9 million internally displaced persons and 1.7 million returnees in South Sudan, together with approximately 600,000 refugees and asylum seekers, over 500,000 of whom were from Sudan.

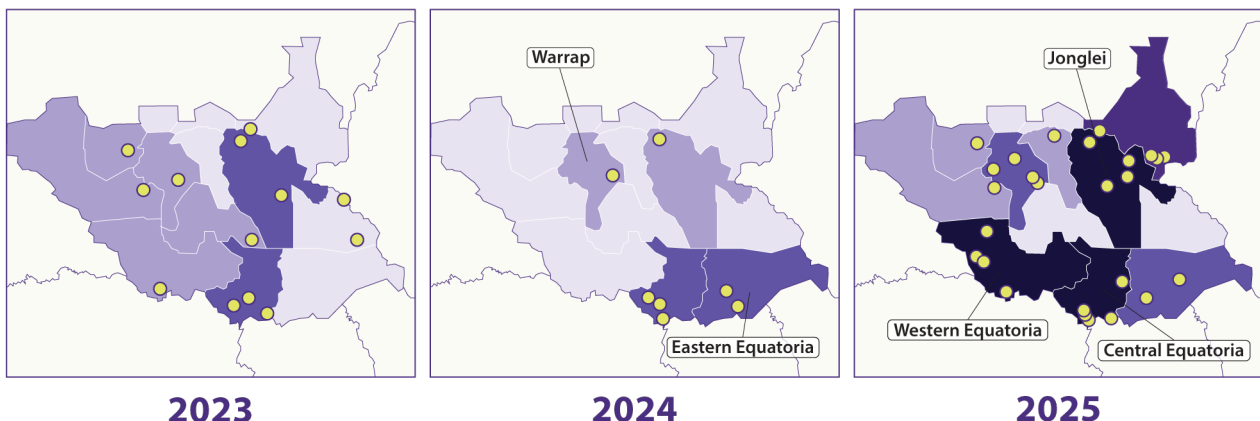
Humanitarian health responses were severely constrained by funding cuts, with at least ten medical facilities being forced to close due to drug shortages after the United States Agency for International Development (USAID) suspended all funding for international organizations at the start of July.

VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2025

In 2025, violence against or obstruction of health care was reported in ten states – six more than in 2024 – with reported incidents spreading to Lakes, Unity, Northern and Western Bahr el Ghazal, Upper Nile, and Western Equatoria. Reported incidents increased in Jonglei state from one in 2024 to six in 2025, and in Western Equatoria from no identified incidents in 2024 to six in 2025. Incidents continued to be reported in Central Equatoria.

Known locations of reported incidents affecting health care in South Sudan, 2023-2025

Incidents increased in Central Equatoria, Jonglei and Western Equatoria in 2025, reflecting the wider deterioration in security in these areas.



Source: Insecurity Insight for the SHCC.



Health workers killed and kidnapped

A similar number of incidents affected health care providers operating in national health structures as in NGOs, with two affecting UN agencies and one a private health care organization.²

Damage to or the destruction of health facilities increased, along with the looting of medical supplies. Health worker killings and kidnappings persisted. Most incidents were attributed to unidentified men armed with guns.

SSPDF air strikes damaged or endangered health facilities in Jonglei, while SSPDF soldiers and Lou Nuer youth clashed inside a hospital in Upper Nile state, forcing staff to evacuate the facility.³ Police patrol officers reportedly stopped and physically assaulted two health workers returning home from a hospital night shift in Warrap state.⁴ Members of the SPLA-IO attacked health facilities and looted medical supplies in Central and Western Equatoria.⁵

Public health response services were affected by conflict-related violence in 2025 when a police officer was shot and killed by unidentified perpetrators while escorting a team of health workers responding to a cholera outbreak among children in a remote part of Jonglei state.⁶

Health facilities damaged or destroyed

In 2025, health facilities were damaged on five occasions, compared to no identified incidents in the previous two years. SSPDF air strikes damaged two international NGO (INGO) health facilities in Jonglei, including an INGO-supported hospital (the only one in the county, serving more than 110,000 people), which was bombed by two helicopters suspected to belong to the SSPDF in the earlier hours of May 3.⁷





The pharmacy was completely burned down, destroying all medical supplies, and two health workers and a patient inside the hospital were injured. Following the attack, aid teams withdrew staff, patients were relocated and the UN airlifted essential medical supplies to replenish stocks.

Another INGO medical facility in Jonglei was struck and damaged by helicopter gunfire during an aerial attack by an unidentified perpetrator, while a fourth facility in Upper Nile was hit by bombing of unidentified origin.⁸

In Western Equatoria, armed men deliberately set on fire a primary health care center – the only health facility in the area.⁹

Medical supplies looted

The looting of vital medical supplies from health centers and vehicles was reported on seven occasions in 2025, with medicine stocks and medical equipment and other essentials being taken and staff threatened. In one violent incident in Warrap state, armed youths attacked a hospital, looted medical supplies and killed two hospital security guards.¹⁰

Following lootings, health facilities often closed due to security concerns for staff and patients, including an INGO hospital and office in Upper Nile, which in April was stormed by armed men who threatened staff and looted vital supplies. This led to the suspension of all services at the only functioning facility in the area and, by June, its permanent closure, together with the withdrawal of support to 13 primary health care facilities.¹¹

Health workers killed and kidnapped

In 2025, five health workers were killed in five incidents, compared to two in two incidents in 2024 and six in three incidents in 2023. Health workers were shot and killed in road ambushes, inside health facilities and at markets. Four staff were killed in three incidents in June, including a nurse and two civilians who were shot dead when unidentified gunmen who had reportedly crossed the border from Uganda opened fire in a market in Central Equatoria.¹²

Four health workers were kidnapped in two incidents in 2025, compared to five in three incidents in 2024 and no identified reports in 2023. Health workers were kidnapped in road ambushes by armed individuals while traveling to provide care in remote areas. All four kidnapped staff were held for over 24 hours before being released.¹³



This chapter is based on 2023-2025 SSD SHCC Health Care Data. Download this data on the [Humanitarian Data Exchange \(HDX\)](#).

Insecurity Insight updates data continuously and numbers may change if new information is made publicly available. For the latest available figures, see Insecurity Insight's [global map](#) on attacks on health care.



THE IMPACT OF ATTACKS ON HEALTH CARE

As of October 2025, the World Health Organization (WHO) identified cholera, malnutrition, trauma, maternal and neonatal risks, non-communicable diseases, and flooding as the main public health threats in South Sudan, which also remained the epicenter of a regional cholera crisis. Between September and December 2025, 5.97 million people faced acute food insecurity, including 1.3 million experiencing emergency conditions and 28,000 experiencing catastrophic conditions, with violence further exacerbating malnutrition and limiting access to life-saving care.

In 2025, access challenges and ongoing violence intensified the country's health care crisis, limiting the availability of medications and immunizations. Attacks on health facilities created difficult operating conditions, forcing Médecins Sans Frontières (MSF) to close its hospital in Ulang county, Upper Nile state, and withdraw support from 13 community-based health centers, leaving 150,000 people with reduced access to care and severely affecting maternal health services.

Severe funding gaps further weakened South Sudan's health care system, after reported cuts to 36% of official development assistance and 90% of US government support. With only 3% of the national budget allocated to health care and over half of health care costs borne by individuals (most of whom were living on less than USD 2.15 per day), access to care remained critically limited, leaving many people dependent on humanitarian services that were frequently targeted and whose ability to provide care was constrained by insecurity.

- 1 The SHCC's 2024 Annual Report cited seven incidents of violence against or obstruction of health care in South Sudan in 2024 and 14 in 2023. Data is continuously updated and numbers can change if new information is made publicly available.
- 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident numbers 122332; 122333; 118821.
- 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 95398.
- 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 123625.
- 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident numbers 109068; 119435.
- 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 88029.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 98669.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident numbers 121193; 99609.
- 9 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 112994.
- 10 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 122336.
- 11 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 95338.
- 12 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident number 109067.
- 13 Insecurity Insight. Safeguarding Health in Conflict Coalition 2025 Report Dataset: 2023-2025 SSD SHCC Health Care Data. Incident numbers 112995; 121160.

SAFEGUARDING HEALTH IN CONFLICT

The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators. Suggested citation: Safeguarding Health in Conflict Coalition (SHCC) 2026. Care in the Crosshairs: Violence Against Health Care in Conflict, May 2026. <https://shcc.pub/SHCCAnnualReport2025>
<https://safeguarding-health.com>

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