



# SUDAN

Sudan needs to make progress in all areas in order to respond to the diabetes challenge. A national plan that includes a range of preventive policies should be implemented and funding needs to increase.

Some diabetes-related deaths (1.2%) have been prevented due to previous diabetes-related health expenditures. Increased funding for cost-effective diabetes prevention and treatment is needed.



National diabetes and NCD plans are partially implemented. There is some cross-Government discussion of NCD policies and those on regulating marketing to children and promoting physical activities are already in development.



The health system provides – although not universally – services for treatment and prevention of secondary complications. Prevention and early diagnosis services are not provided. Less than 50% of the cost is covered and availability of self-management education is limited. No specialised services are provided for vulnerable population groups.



There is no framework for diabetes monitoring and surveillance, although data is gathered on incidence/prevalence of diabetes, prevalence of raised blood pressure and tobacco use and level of physical inactivity.



The Government provides funding for diabetes as part of the general health system budget, but does not specifically cover prevention, early diagnosis, treatment or prevention of secondary complications.



The Government offers minimal scope for engagement and has taken no action on rights.



Global Monitoring Framework: Adopted.

## SUDAN at a glance (IDF Diabetes Atlas, 2013)

Adult population (20-79) in 1000s	18,119.53	Diabetes expenditure / person with diabetes (USD)	170
Diabetes cases (20-79) in 1000s	1,402.22	Diabetes related deaths (20-79)	25,342
Diabetes raw national prevalence (%) (extrapolated)	7.74	Number of people with undiagnosed diabetes (20-79) in 1000s	701.11

# THE GLOBAL DIABETES SCORECARD TRACKING PROGRESS FOR ACTION

- 🎯 IDF's Global Diabetes Scorecard is designed as a powerful tool for advocacy on behalf of people with diabetes – to highlight areas of good practice and identify areas for more effective action.
- 🎯 It measures governments' response to diabetes in key areas: national plans and policies, health systems, monitoring and funding for diabetes as well as rights and engagement.
- 🎯 It tracks government progress on international commitments to reduce premature deaths from diabetes and other NCDs.
- 🎯 IDF Member Associations have used their knowledge and views to provide the data to score countries from red, through amber and yellow, to green.
- 🎯 It identifies that internationally more efforts must be put into preventive policies, financing for diabetes and rights for people with diabetes.



## INTRODUCTION TO THE MIDDLE EAST AND NORTH AFRICA REGION

The Middle East and North Africa Region (MENA) is one of the global diabetes hotspots. Across the Region, more than one in ten people have diabetes - approximately 35 million people. In the next two decades, the number of people with diabetes is expected to almost double.

Faced with a challenge on this scale, governments in MENA will need to provide services and programmes for prevention in order to stem the rising tide of diabetes.

According to the data from IDF Member Associations in MENA, the majority of countries in the Region are making progress in responding to diabetes; however, a third of countries obtain a red score. About half of the countries achieve a moderate score for national policies and plans, with the rest falling at the lower end of the spectrum, pointing to a need to expand and strengthen diabetes policies.

Policies on prevention need significant strengthening. More than half of countries do not have preventive nutrition policies and a third have no physical activity policies. Policies

regulating marketing to children are limited or not enforced. In the majority of countries diabetes self-management education is limited and in no country is such education reported as being an integral part of diabetes care.

Health system policies are the strongest performing area in the MENA countries with all countries scoring orange or higher. The status of monitoring and surveillance systems varies across the Region, with some countries achieving a high score, but the majority are achieving a low to moderate rating.

The majority of countries are providing some funding to respond to the diabetes challenge and score in the middle of the spectrum for their budgeting and finance policies. However, the sixth edition of the IDF Diabetes Atlas reports that only 2.5% of global health expenditure on diabetes is spent in the MENA Region.

Fewer than half of the countries in the Region have adopted the Global Monitoring Framework for NCDs to date.

11

MENA countries provided their input to this survey

73%

report having a national diabetes plan (full or partial implementation)

0

countries report integrated diabetes self-management education

36%

report not having any physical activity policies