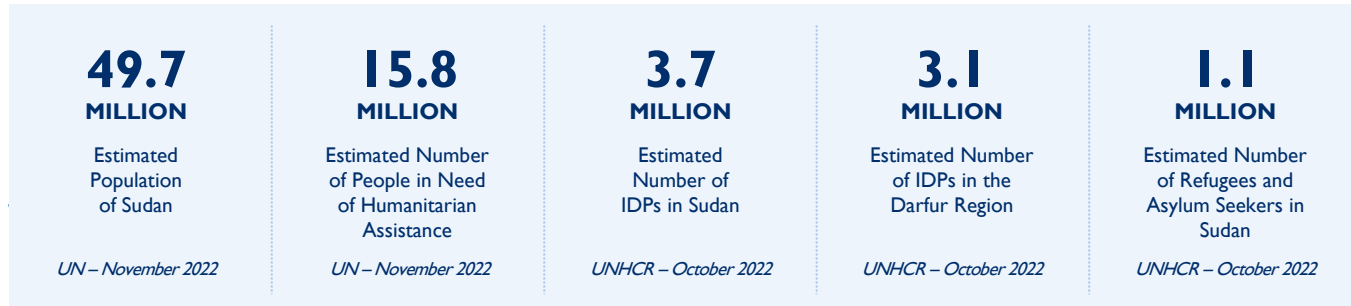


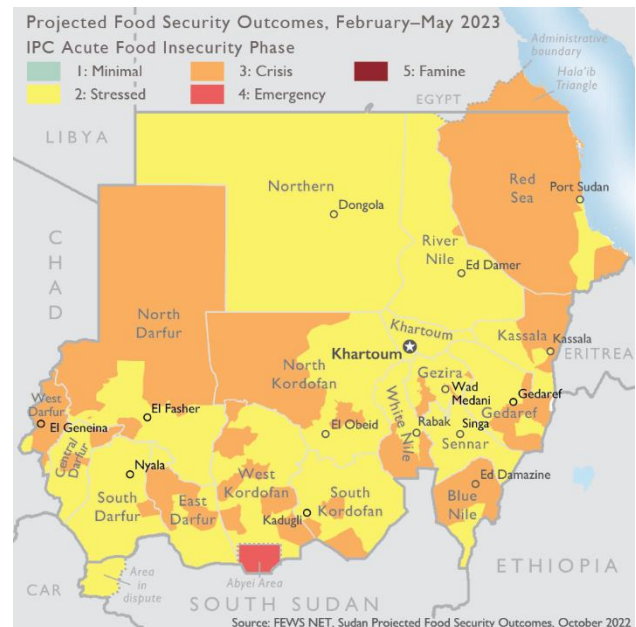
Sudan – Complex Emergency

DECEMBER 2, 2022

SITUATION AT A GLANCE



- Approximately 15.8 million people in Sudan will likely require humanitarian assistance in 2023, according to the 2023 Sudan HNO, constituting the largest number of people in need in the country since 2011.
- Deteriorating security conditions resulted in at least 829 civilian deaths and displaced an estimated 265,000 people from January to September, with violent clashes and resultant displacement exacerbating humanitarian needs, according to the UN.
- Widespread flooding increased the risk of contracting vector-borne and waterborne diseases, resulting in an increase in dengue fever, hepatitis E, and malaria cases, according to the UN and GoS.
- USAID/BHA delivered approximately 45,000 MT of sorghum—procured through the Bill Emerson Humanitarian Trust—to Sudan in November to support WFP’s response to critical food shortages in the country through April 2023.



¹ FY 2023 funding for the Sudan Complex Emergency will be included in future products when committed/obligated. For information on the U.S. Government’s funding toward the response in FY 2022, refer to Sudan Complex Emergency Fact Sheet #6 released on September 30, 2022, available on the USAID website at <https://www.usaid.gov/humanitarian-assistance/where-we-work>.

KEY DEVELOPMENTS

Humanitarian Needs Increase Across Sudan, With 15.8 Million People Likely To Require Assistance in 2023

An estimated 15.8 million people across Sudan—approximately one-third of country’s total population of nearly 50 million people—will likely require humanitarian assistance in 2023, largely due to the combined effects of climatic events, disease outbreaks, poor macroeconomic conditions, and protracted conflict, according to the 2023 Sudan Humanitarian Needs Overview (HNO) released on November 7. The population in need of humanitarian assistance, which includes an estimated 2.5 million internally displaced persons (IDPs) and nearly 1 million refugees, constitutes the largest number of people in need of humanitarian assistance in Sudan since 2011. Nearly 50 percent of the total population in need of assistance reside in just five of Sudan’s 18 states, with the largest population in Khartoum, followed by South Darfur, North Darfur, Gezira, and Central Darfur.

Food, health, and water, sanitation, and hygiene (WASH) assistance will likely constitute the most significant needs for the affected population in 2023. Conflict, displacement, dry spells, and high commodity, food, and energy prices have exacerbated acute food insecurity across Sudan, particularly among IDPs, refugees, and vulnerable resident communities. A record 11.7 million people will likely experience Crisis—IPC 3—or worse levels of acute food insecurity and require emergency food assistance in 2023, representing an increase of approximately 2 million food-insecure people compared with 2022.² In addition, an estimated 11.5 million and 10.1 million people will require WASH and health assistance, respectively, over the course of the year, according to the UN. Moreover, the 2023 HNO notes that political instability and insecurity—particularly in Sudan’s Darfur region, comprising Central, East, North, South, and West Darfur states—may continue to obstruct humanitarian access and operations as needs increase in 2023.

Armed Clashes Displace More Than 265,000 People and Drive Humanitarian Needs Throughout Sudan

Security conditions deteriorated across much of Sudan between January and October, endangering civilians, driving displacement, and exacerbating humanitarian needs, relief actors report. During this period, the UN recorded nearly 290 incidents of armed attacks and intercommunal violence, representing a 39 percent increase in the number of overall security incidents compared with the same period in 2021 and resulting in at least 829 civilian deaths and the displacement of approximately 265,000 people across the country. Violence remained concentrated in Blue Nile and West Kordofan states, as well as in the Darfur region. In October, intercommunal violence resulted in the deaths of at least 258 people and displaced more than 55,000 people in Blue Nile and West Kordofan, with the total number of people displaced by clashes in Blue Nile from July to October surpassing 97,000. In Central Darfur, clashes between two factions of the Sudan Liberation Army opposition group that began on November 19 in Shamal Jabal Marrah locality had resulted in the deaths of at least 13 individuals as of November 24, according to community leaders and relief actors. In addition, the recent clashes in Central Darfur displaced at least 5,600 people to the state’s Sabanaga and Toga IDP gathering sites and to several villages in Wasat Jabal Marrah locality and neighboring South Darfur. In response to the clashes, Government of Sudan (GoS) security forces deployed to the conflict-affected areas, which remained inaccessible to humanitarian organizations due to continuing insecurity as of November 24.

² The Integrated Food Security Phase Classification (IPC) is a multi-partner initiative that developed a standardized scale to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries and time, ranges from Minimal—IPC 1—to Famine—IPC 5—for acute food insecurity.

The recent conflict and resultant displacement continue to exacerbate high levels of humanitarian needs throughout Sudan. In Central Darfur, newly arrived IDP populations have joined an estimated 16,000 IDPs already living at the Sabanaga and Toga IDP gathering sites, increasing demand for limited humanitarian resources and services. USAID's Bureau for Humanitarian Assistance (USAID/BHA) and the U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM) are coordinating with partners to ensure a comprehensive response to address the needs of conflict-affected populations throughout the country.

Sudan Continues to Experience Uptick in Communicable Diseases Following Heavy Rainy Season

Sudanese populations continue to face growing caseloads of communicable diseases—including dengue fever, hepatitis E, malaria, and measles—throughout the country, health actors report. The GoS had reported more than 500 confirmed cases and approximately 4,500 suspected cases of dengue fever in 10 of the country's 18 states since late July as of December 2, with the highest number of confirmed cases in North Darfur, North Kordofan, and West Kordofan states. The surging caseloads, which have resulted in at least 29 related deaths, represent the worst dengue fever outbreak in Sudan in the past decade, according to a government official. The growing spread of the disease is likely attributable to recent heavy rainfall and limited usage of preventative measures, including insect repellent and mosquito nets, international media report. The severity of the outbreak in North Kordofan prompted the Central Committee of Sudan Doctors—a medical union supporting pro-democracy protesters—to issue a statement on November 10 calling for several emergency measures, including the closure of educational institutions in the state, the declaration of a health emergency in the state's capital city of El Obeid, the distribution of mosquito nets in the city, the formation of medical response teams, and the provision of additional equipment and staffing for health centers. In addition to the increase in dengue fever cases, by mid-October, malaria cases reported to date in 2022 surpassed the 1.7 million cases reported throughout the entirety of 2021, in addition to surpassing the epidemic threshold in 12 states, according to the UN World Health Organization (WHO). Furthermore, an outbreak of hepatitis E, which is primarily transmitted through contaminated water, had resulted in 24 deaths and approximately 2,700 suspected cases as of October 28, the UN reports.

The rising caseloads of communicable diseases follow heavy rains and subsequent floods across Sudan since May that increased the risk of transmission of vector-borne and waterborne diseases. The floods have created stagnant water pools that serve as breeding sites for disease vectors, such as mosquitoes, that transmit the pathogens responsible for dengue fever and malaria. Flooding has also limited access to safe drinking water, prompting affected populations to resort to drinking untreated water from contaminated water sources, according to the UN. In response to the floods, USAID/BHA and State/PRM partners have delivered multi-sector assistance—including emergency shelter and WASH supplies, medical services, and multipurpose cash assistance—to flood-affected households throughout the country. In addition, USAID/BHA partner WHO and its partners continue providing health education services, vaccination campaigns, and vector-control activities to slow the spread of communicable diseases.

U.S. Government Delegations Visit Communities and Partners in Sudan

In November, State/PRM and USAID/BHA delegations met with conflict-affected communities and relief actors in Sudan to assess humanitarian conditions and monitor ongoing responses. In South Darfur, State/PRM representatives met with South Sudanese refugees and Sudanese IDPs, who highlighted the risk of assault near displacement camps, as well as the lack of sufficient food and economic opportunities. Humanitarian partners also noted that the reduction of the UN World Food Program's

(WFP) food assistance for refugees and IDPs since July 2022 due to funding constraints—compounded by climatic events, high inflation, and limited development funding—has exacerbated levels of severe acute malnutrition among communities across the country, particularly in the Darfur region. In Khartoum, refugees from Eritrea, Ethiopia, South Sudan, and Syria expressed similar concerns regarding protection and insufficient access to essential resources and services. In response, State/PRM partners the Office of the UN High Commissioner for Refugees (UNHCR) and the UN Children’s Fund (UNICEF) continue to collaborate to provide education, health, nutrition, protection, shelter, and WASH services to more than 1.1 million refugees and host community members in Sudan.

In addition, in early November, a USAID delegation visited a health and nutrition center in South Darfur supported by USAID/BHA partner UNICEF and met with local government officials to reaffirm USAID’s ongoing commitment to providing humanitarian assistance to communities in need across Sudan. USAID/BHA also met with IDPs who were receiving integrated basic health care services—such as medical consultations and vaccinations—and integrated nutrition programs for children experiencing wasting—the deadliest form of malnutrition—that provide specialized nutritious foods, as well as essential medical supplies and vaccines.

KEY FIGURES



8.4 Million

People supported monthly by emergency food and nutrition assistance by WFP with USAID/BHA support from January to October



35,000

People who received outpatient consultations, including nearly 12,000 children younger than five years of age, through a USAID/BHA partner in October

U.S. GOVERNMENT RESPONSE

FOOD SECURITY

USAID/BHA supports multiple UN agencies and non-governmental organizations (NGOs) to bolster food security and livelihoods in Sudan. USAID/BHA supports WFP to provide emergency food assistance to people experiencing acute food insecurity in Sudan, primarily through cash transfers for food and U.S.-, regionally, and locally sourced cereals, pulses, and vegetable oil. With USAID/BHA support, WFP reached approximately 8.4 million people in Sudan with emergency food and nutrition assistance between January and October. In addition, in November, USAID/BHA delivered approximately 45,000 metric tons (MT) of U.S.-sourced sorghum—procured through the Bill Emerson Humanitarian Trust—to Sudan to support WFP’s response to critical food shortages in the country through April 2023. Moreover, USAID/BHA partner the UN Food and Agriculture Organization (FAO) provides agricultural inputs and training for smallholder farmers throughout the country. During the 2022 June-to-August planting season, USAID/BHA supported FAO to provide nearly 2,000 MT of cowpea, groundnut, millet, and sorghum seeds to more than 100,000 farming households.

HEALTH

USAID/BHA supports the International Organization for Migration (IOM), the UN Population Fund (UNFPA), UNICEF, WHO, and 11 NGOs to provide life-saving health care across Sudan. USAID/BHA has provided essential medicines, supported health facilities, and trained implementing partners to support critical health needs, including coronavirus disease (COVID-19) response efforts. In addition, USAID/BHA NGO partners and State/PRM partners—including UNHCR—support essential health interventions for IDPs, refugees, and other vulnerable populations in Sudan.



18

Number of USAID/BHA partners implementing critical WASH programs

WASH

USAID/BHA and State/PRM support IOM, UNICEF, and 16 NGOs to provide emergency WASH assistance throughout Sudan to prevent and contain communicable disease outbreaks, including COVID-19. Following heavy rains and associated flooding since May, USAID/BHA partners have supported affected populations by distributing emergency WASH supplies—such as chlorine, hygiene kits, soap, and water containers—to ensure access to safe drinking water. In addition, State/PRM and USAID/BHA partners have improved access to safe drinking water and provided hygiene awareness sessions to conflict-affected populations, as well as other populations in need.



3,000

Children younger than five years of age screened for malnutrition in October by a USAID/BHA partner

NUTRITION

USAID/BHA and State/PRM supports IOM, UNICEF, and 10 other partners on the forefront of efforts to prevent, identify, and treat wasting—the deadliest form of malnutrition—through the implementation of multi-sector integrated intervention approaches, including the provision of nutritional supplements, as well as agriculture, food security, health, and WASH activities. Nutrition programming supports community- and evidence-based management of malnutrition by focusing on children and pregnant and lactating women and supporting nutrition education.

CONTEXT IN BRIEF

- Ongoing conflict, protracted displacement, and climatic events in Sudan have disrupted livelihood activities and impeded access to natural resources and basic services. Fighting among the Sudanese Armed Forces, armed opposition groups, militias, and ethnic groups in Abyei Area, the Darfur region, and Blue Nile and South Kordofan states has resulted in increasing food, health, nutrition, protection, shelter, and WASH needs. The ongoing economic crisis and the impact of COVID-19 containment measures have compounded humanitarian needs.
- In April 2019, a civilian uprising grew out of protests against high prices for bread, fuel shortages, and other economic issues. On April 11, Sudanese military officials overthrew President Omar al-Bashir in support of a popular revolution, and subsequent political uncertainty contributed to heightened humanitarian security and protection concerns. In August, a signed constitutional declaration laid out arrangements for a civilian-led transitional government for a 39-month period, with Abdalla Hamdok appointed as Prime Minister. However, following political unrest, the military took over the government on October 25, 2021, arresting civilian leadership. On November 21, Hamdok was reinstated as Prime Minister under a power-sharing agreement with military leader Abdel Fattah al-Burhan but thereafter resigned on January 2, 2022.
- Heavy seasonal rainfall and resultant flooding since early May 2022 adversely affected an estimated 349,000 people in 16 of Sudan's 18 states. On August 23, U.S. Chargé d'Affaires, a.i., Amber M. Baskette issued a declaration of humanitarian need/disaster declaration due to the effects of the floods in Sudan.
- On October 6, 2022, U.S. Ambassador John T. Godfrey reissued a declaration of humanitarian need in Sudan for FY 2023. The U.S. Mission in Sudan has issued disaster declarations or declarations of humanitarian need due to the complex emergency in Sudan annually since 1987.
- The UN estimates that 15.8 million people will require humanitarian assistance in Sudan in 2023. Insecurity, access restrictions, limited funding, and bureaucratic impediments limit relief agencies' ability to respond to humanitarian and recovery needs in Sudan. Despite humanitarian access improvements since 2016, particularly in Jebel Marra, a mountainous region encompassing parts of Central Darfur, North Darfur, and South Darfur, relief agencies continue to face a challenging operational environment in Sudan.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at [interaction.org](https://www.interaction.org).
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietarily, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: [cidi.org](https://www.cidi.org)

- Information on relief activities of the humanitarian community can be found at reliefweb.int.

USAID/BHA bulletins appear on the USAID website at [usaïd.gov/humanitarian-assistance/where-we-work](https://www.usaid.gov/humanitarian-assistance/where-we-work)