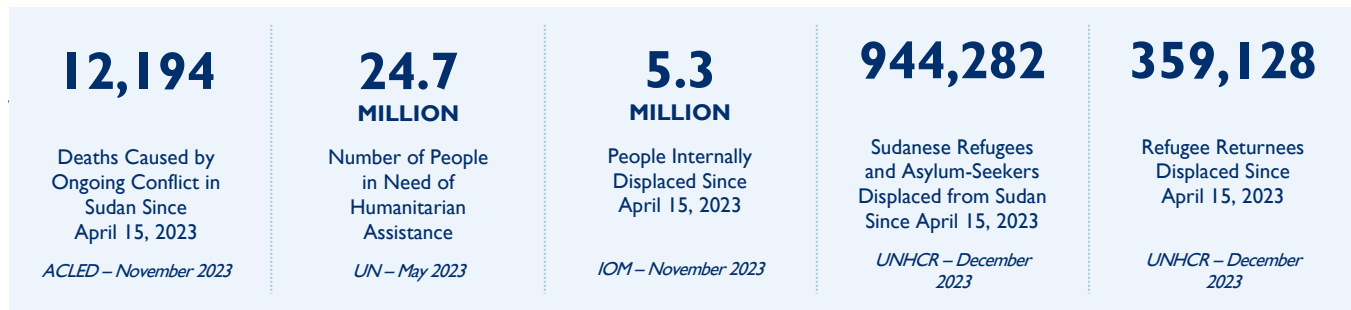


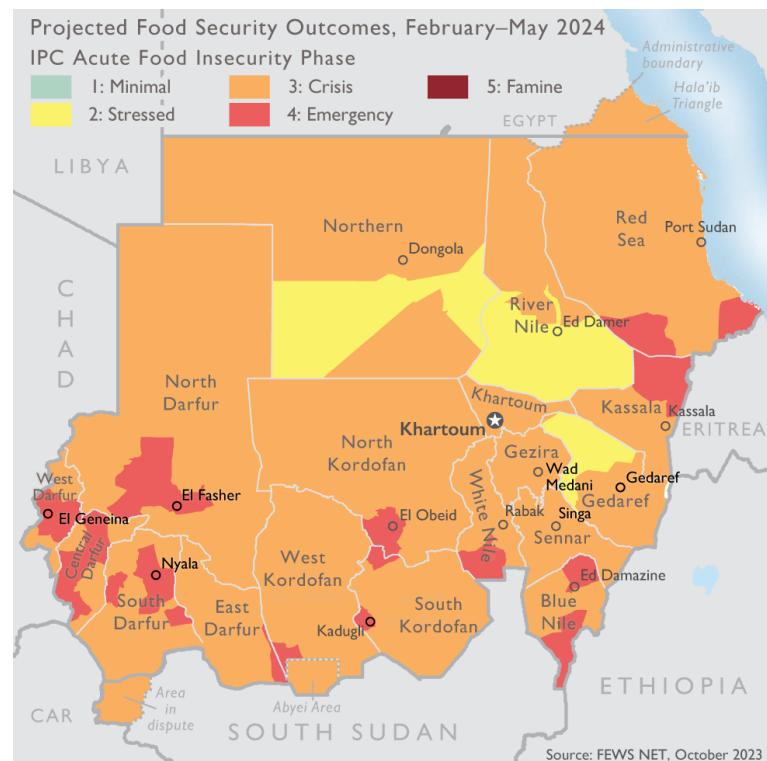
Sudan – Complex Emergency

DECEMBER 5, 2023

SITUATION AT A GLANCE



- Sudan continues to face the world’s largest child displacement crisis, as approximately 7,600 children fled their homes daily between September 30 and November 15, according to a recent NGO report. Relief actors warn of increasing child protection violations and GBV incidents amid high levels of displacement.
- Health actors report approximately 5,100 suspected cholera cases across nine states as of December 2, while an estimated 80 percent of health facilities in conflict-affected areas are non-operational.
- An influx of IDPs in El Fasher may exacerbate already deteriorating humanitarian conditions and food shortages, WFP reports.



¹ FY 2024 funding for the Sudan Complex Emergency will be included in future products when committed/obligated. For information on the U.S. Government (USG)’s funding toward the response in FY 2023, refer to Sudan Complex Emergency Fact Sheet #20 released on September 29, 2023, available on the USAID website at <https://www.usaid.gov/humanitarian-assistance/where-we-work>.

KEY DEVELOPMENTS

Sudan is Experiencing the World’s Largest Child Displacement Crisis Amid Increasing Child Protection Violations and GBV Incidents

Sudan is currently experiencing the world’s largest child displacement crisis, with 3 million children—approximately one in every eight children—having fled violence to seek shelter in camps, displacement centers, relatives’ homes, or schools since mid-April, the UN’s Children Fund (UNICEF reports). An estimated 7,600 Sudanese children fled their homes daily between September 30 and November 15, putting them at increased risk of abuse, exploitation, and violence, according to a USAID Bureau for Humanitarian Assistance (USAID/BHA) non-governmental organization (NGO) partner. UNICEF recorded more than 3,100 allegations of severe violations of children’s rights—including killing, maiming, and sexual violence—between mid-April and November 20, though the true figure is likely much higher, as access constraints and communication blackouts lead to underreporting. At least half of reported violations occurred in Sudan’s Darfur region, where more than 2 million internally displaced persons (IDPs) were sheltering amid ongoing violence as of November 21.² The number of child rights violations in the region to date in 2023 is already 450 percent higher than the number reported in all of 2022, according to UNICEF.

Several alarming gender-based violence (GBV) trends have emerged since the conflict erupted in mid-April, including increases in kidnappings of women and girls; an elevated number of women seeking GBV and sexual and reproductive health services at health facilities, many of whom are displaced from conflict-affected states and are pregnant as the result of rape; and widespread reports of intimate partner violence, according to October reports from the African Centre for Justice and Peace Studies and Strategic Initiative for Women in the Horn of Africa and a November report from the Protection Cluster—the coordinating body for humanitarian protection activities, comprising UN agencies, NGOs, and other stakeholders. Independent experts from the UN Human Rights Council, including the Special Rapporteur on violence against women and girls, have also expressed alarm over the growing use of GBV as a tool of war, particularly by the Rapid Support Forces (RSF) and allied militias. In a statement on November 30, the experts reported allegations of forced disappearances, marriage, and prostitution; rape; sexual exploitation; and slavery, with some cases likely ethnically, politically, and racially motivated. Moreover, survivors of violence and sexual exploitation are often unable to receive necessary care, as many IDP sites lack properly trained service providers who can deliver confidential support to survivors, according to the Protection Cluster.

More Than 5,100 Cholera Cases Reported With Up to 80 Percent of Health Facilities in Conflict-Affected Areas Non-Operational

The UN World Health Organization (WHO) and the Government of Sudan (GoS) Ministry of Health (MoH) reported more than 5,100 suspected cases of cholera and 161 associated deaths between July and December, representing a case fatality rate of more than 3 percent and exceeding the WHO’s 1 percent emergency threshold. Cholera had spread to 46 localities in Blue Nile, Gedaref, Gezira, Kassala, Khartoum, Red Sea, Sennar, South Kordofan, and White Nile States as of November 28, according to the UN. In response to the growing number of cholera cases, USAID/BHA partners UNICEF and WHO are leading emergency water, sanitation, and hygiene (WASH) response activities, as cholera is closely linked to a degradation in WASH services, as well as supporting the detection and treatment of cases. In addition, WHO and the GoS MoH conducted a cholera vaccination campaign in six localities in Gedaref and one locality in Gezira between November 20 and 26, with 98 percent

² Darfur region comprises the following states: Central Darfur, East Darfur, North Darfur, South Darfur, and West Darfur.

coverage across those seven localities. U.S. Department of State Bureau of Population, Refugees, and Migration (State/PRM) Partner the Office of the UN High Commissioner for Refugees (UNHCR) reports that the cholera outbreak in Gedaref's Um Gargour locality, which was first reported on October 10 and reached more than 40 cases by the week of November 13, has stabilized due to the vaccination campaign. Vaccine doses for Khartoum—where more than 460 suspected cases had been reported as of December 2—are expected to arrive in early December, the UN reports, though relief actors raised concern that the high level of insecurity in and around Khartoum city will make conducting a vaccination campaign in Khartoum extremely challenging, exacerbating the risk of future spread.

WHO has reported that the health sector's capacity to respond to cholera outbreaks remains constrained, as up to 80 percent of health facilities in conflict-affected areas are non-operational due to attacks on health care systems, insecurity, and shortages of health workers and health supplies. As of late November, WHO had verified 60 attacks on the health care system since mid-April, resulting in the death of 3 people and injury to nearly 40 others. Health facilities that remain functional are overwhelmed by the influx of people seeking care, many of whom are among the 6.6 million people—more than 14 percent of Sudan's population—newly displaced as a result of the conflict.

Price Increases Threaten Food Security Countrywide; IDPs in El Fasher Face Food Shortages

Surging market prices due to diminished access to agricultural livelihoods and transportation routes, insecurity, and shortages of basic goods continue to threaten food security countrywide, according to the UN World Food Program (WFP). As many people in Sudan—particularly the urban population—heavily rely on markets to meet their daily food needs, any disruptions to market supply will have negative implications for food access. Despite Sudan's extensive and well-connected market system and internal supply chains, the conflict has disrupted the flow of commodities and destabilized market prices as shocks transmit from one market to another, WFP reports. Increased prices in conflict-affected areas have even affected parts of Sudan that have not experienced widespread conflict, though typically at a lower magnitude. For instance, prices of sorghum in Kassala—a relatively stable state—increased by 16 percent since the conflict started; meanwhile, sorghum prices in West Kordofan State have increased by as much as 122 percent, WFP reported in late November.

An influx of IDPs arriving in North Darfur's capital city of El Fasher fleeing clashes between Sudanese Armed Forces (SAF) and the RSF in other parts of Darfur has contributed to deteriorating humanitarian conditions and food shortages among displaced populations, especially those gathering in existing IDP sites, local media report. More than 437,000 IDPs were sheltering in North Darfur as of December 5, an increase of nearly 8 percent since the prior week, according to the International Organization for Migration (IOM). As of November 27, large numbers of armed group members were also arriving in El Fasher, heightening tensions and the possibility of secondary displacement, UNHCR reports. IDPs sheltering outside of El Fasher in North Darfur's Tawila town reportedly exhausted their food supplies on November 24 as a continued influx of new arrivals strained their already limited resources, according to local media. The shortage of food in Tawila has forced IDPs to move to other sites, further disrupting the food supply. According to WFP, the high number of IDPs arriving in North Darfur may cause a surge in food demand and further raise market prices, limiting access to food for both IDPs and host community members.

UNSC Votes to Terminate UNITAMS

The UN Security Council (UNSC) voted to end the UN Integrated Transitional Assistance Mission in Sudan (UNITAMS) on December 1. The UNSC began scaling down UNITAMS operations on December

4 and plans to fully transition UNITAMS functions to UN agencies operating in Sudan by February 29, 2024, the UN reports. The decision follows the GoS' November 16 letter to the UNSC requesting the termination of UNITAMS. The UN established UNITAMS in June 2020 for 12 months to assist Sudan in transitioning to democratic governance, and the UNSC renewed the mandate through December 2023.

KEY FIGURES



3 Million

People reached with WFP food assistance between the onset of the crisis in mid-April and early October



1,000 MT

Of medical supplies shipped by WHO across Sudan with USAID/BHA support between April 15 and October 4



3.9 Million

Children screened for malnutrition by USG partner UNICEF between April 15 and October 31



141,000

Women and girls reached with dignity kits and information about GBV services between April 15 and October 29 by USG partner UNFPA

U.S. GOVERNMENT RESPONSE

FOOD SECURITY

USAID/BHA and State/PRM support multiple UN agencies and NGOs to bolster food security and livelihoods throughout Sudan. In partnership with USAID/BHA, WFP provides emergency food assistance to people experiencing acute food insecurity countrywide through cash transfers for food and U.S.-sourced and locally and regionally procured cereals, pulses, and vegetable oil. The UN agency reached an estimated 3 million people across Sudan between the onset of the crisis in mid-April and early October with support from USAID/BHA and other donors.

HEALTH

USAID/BHA and State/PRM support IOM, UNICEF, the UN Population Fund (UNFPA), UNHCR, WHO, and additional NGO partners to provide life-saving health care across Sudan. USAID/BHA partners provide essential medicines, support health facilities, and train implementing partners to support critical health needs. In addition, USG partners—including UNFPA and UNICEF—support essential health interventions for IDPs, refugees, and other vulnerable populations in Sudan and Sudanese refugees in neighboring countries.

NUTRITION

With USAID/BHA and State/PRM support, IOM, UNICEF, WFP, WHO, and other partner organizations prevent, identify, and treat acute malnutrition through multi-sector integrated interventions, such as providing nutritional supplements, as well as agriculture, food security, health, and WASH activities. Between April 15 and October 31, UNICEF screened 3.9 million children ages five years and younger for malnutrition and admitted nearly 234,000 children for treatment of severe acute malnutrition.

PROTECTION

USG partners—including UNFPA, UNICEF, and several NGOs—provide conflict-affected and vulnerable people with USG support in Sudan, as well as neighboring countries. UNFPA reached approximately 141,000 individuals with dignity kits and awareness-raising sessions on clinical management of rape services, psychosocial support, GBV case management, and referrals to other services.



4.2 Million

People in Sudan provided with safe drinking water by USG partner UNICEF between April 15 and October 31

WASH

USAID/BHA and State/PRM support IOM, UNICEF, UNHCR, WHO, and NGOs to provide emergency WASH assistance in Sudan. With USG and other donor support, UNICEF reached an estimated 4.2 million people in Sudan with safe drinking water between April 15 and October 31.

USAID/BHA and State/PRM partners—including UNHCR, UNICEF, and WHO—also assist in preventing and containing disease outbreaks, including cholera, dengue, and malaria. During Sudan’s annual rainy season, USG partners support flood-affected populations with emergency WASH supplies—such as chlorine for water purification, hygiene kits, and water containers—to ensure access to safe drinking water.

CONTEXT IN BRIEF

- In April 2019, a civilian uprising grew out of protests against fuel shortages, high bread prices, and other economic issues. On April 11, 2019, 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 2019, a signed constitutional declaration detailed 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 transitional government on October 25, 2021, arresting civilian leadership. On November 21, 2021 Hamdok was reinstated as Prime Minister under a power-sharing agreement with SAF military leader Abdel Fattah al-Burhan, but thereafter resigned on January 2, 2022. The October 25 military takeover sparked widespread protests across the country. Military leaders and representatives of civilian pro-democracy parties subsequently signed a preliminary agreement to establish a two-year transitional civilian government on December 5, 2022.
- Fighting between RSF elements and the SAF began on April 15, 2023, significantly escalating the humanitarian crisis in Sudan. On April 23, USAID/BHA activated a regionally based Disaster Assistance Response Team (DART) and Washington, D.C.-based Response Management Team to coordinate the USG response to escalating needs.
- The Inter-Agency Standing Committee activated a system-wide scale-up for Sudan—formerly known as an L3 emergency—from August 29, 2023 to February 28, 2024, according to a press release from UN Emergency Relief Coordinator (ERC) Martin Griffiths. The scale-up will mobilize the operational capacities and resources needed to match the scale, complexity, and urgency of the crisis in Sudan.
- The UN estimates that 24.7 million people require humanitarian assistance in Sudan in 2023, an increase from 15.8 million estimated to be in need prior to the RSF–SAF conflict. Access restrictions, bureaucratic impediments, insecurity, and limited funding hinder relief agencies’ ability to respond to humanitarian and recovery needs in Sudan.
- On October 31, 2023, U.S. Ambassador John T. Godfrey reissued a declaration of humanitarian need (DHN) in Sudan for FY 2024. The U.S. Mission in Sudan has issued disaster declarations or DHNs due to the complex emergency in Sudan annually since 1987.

- The USG, the Kingdom of Saudi Arabia, and the International Authority on Development (IGAD)—participating on behalf of the African Union—convened two rounds of humanitarian negotiations between the RSF and SAF in Jeddah, Saudi Arabia. Following the first round of negotiations in May 2023, representatives signed a ceasefire agreement and the May 11 Declaration, which defined the obligations of both sides under international humanitarian and human rights law to facilitate and safeguard humanitarian action to meet the emergency needs of civilians. However, neither party upheld the ceasefire nor the Declaration during the following months. The second round of negotiations—convened between October 26 and November 7—concluded without a ceasefire agreement, though both parties reaffirmed their obligations under the May 11 Declaration to protect civilians.
- Following the conclusion of the second round of negotiations in Jeddah, RSF and SAF actors also agreed to establish an OCHA-led Humanitarian Forum to facilitate the provision of humanitarian assistance in Sudan. The first Sudan Humanitarian Forum convened on November 13 and was attended by representatives of RSF and SAF, opened by ERC Martin Griffiths, and chaired by Deputy Special Representative of the Secretary-General, Resident and Humanitarian Coordinator Clementine Nkweta-Salami.

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

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