Humanitarian Action for Children

Sudan

As the Sudan continues to undergo political transition, the country is facing a complex and protracted humanitarian situation characterized by conflict-related displacement, flooding, epidemics, malnutrition, food insecurity and a deteriorating economy. As of August 2019, 1.8 million people, including 800,000 children, are displaced; and the Sudan is hosting the fourth-highest number of refugees and asylum seekers in the world at 1.1 million.1 In 2020, an estimated 9.3 million people, including 4.65 million children, will require humanitarian assistance.2 Deteriorating household food and nutrition security remain the key drivers of vulnerability in the Sudan. An estimated 5.8 million people – 14 per cent of the population – are experiencing crisis or worse levels of food insecurity, and some 3.2 million women and children are suffering from global acute malnutrition.3 An estimated 700,000 children require treatment for severe acute malnutrition (SAM).4 Due to soaring annual inflation, purchasing power and access to social services have deteriorated, forcing the population to adopt negative coping mechanisms and threatening the well-being of women and children. Outbreaks of diseases such as malaria, dengue, chikungunya and cholera pose an enduring threat.5 The limited number of operational partners in the context of insecurity and inaccessibility continues to hinder humanitarian assistance.

Humanitarian strategy

In 2020, UNICEF will focus on providing basic services to the most vulnerable people in the Sudan, including internally displaced persons and refugees, by putting protection at the centre of humanitarian action. This includes strengthening systems, capacities and processes to deliver efficient and effective services in areas affected by conflict, epidemics, floods and malnutrition.6 UNICEF will implement the response through 10 field offices and by leveraging its cluster leadership to prioritize partner resources and interventions. In health and nutrition, UNICEF will focus on life-saving services and prevention, including early detection and treatment of SAM, infant and young child feeding, integrated management of childhood illness, the provision of essential medicines and capacity building of health care providers. In water, sanitation and hygiene (WASH), UNICEF will provide safe drinking water and sanitation facilities and risk communication services. Protection risks will be addressed through investments in the mitigation and prevention of gender-based violence. In education, UNICEF will advocate for accelerated and flexible access to schooling for 1.7 million out-of-school, crisis-affected children.7 In line with the Grand Bargain commitments and efforts to link humanitarian action and development programming, UNICEF will strengthen partnerships and coordination mechanisms to invest in durable solutions, resilience and capacity development.

Results from 2019

As of 31 August 2019, UNICEF had US$54.7 million available against the US$142 million appeal (39 per cent funded).8 While critical funding gaps, particularly for education, exacerbated by civil unrest and disruption of the academic year, led to low achievement against planned targets, UNICEF leveraged its core resources and government and partner resources to support the humanitarian response. During the year, UNICEF reached nearly 1.1 million people with life-saving interventions. Nearly 500,000 children were vaccinated against measles; nearly 152,800 people accessed safe water; some 762,800 women and children under 5 years accessed essential maternal and child health services; and over 128,000 children were treated for malnutrition. Continuing support during the civil unrest ensured that over 210,000 children, including those affected by or witness to violence, received community-based psychosocial support and specialized counseling through psychosocial support service points. More than 136,000 women and children benefited from violence prevention and response services. Through sensitization initiatives and hygiene messages, nearly 750,000 people are better equipped to respond to flooding and disease outbreaks in the Eastern states. The focus on preparedness and related actions helped to prevent further loss of life and ensured a timely response, reflecting the shift to a development-oriented context.

<table>
<thead>
<tr>
<th>Total people in need</th>
<th>9.3 million9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total children (&lt;18) in need</td>
<td>4.65 million10</td>
</tr>
<tr>
<td>Total people to be reached</td>
<td>2.67 million11</td>
</tr>
<tr>
<td>Total children to be reached</td>
<td>1.4 million12</td>
</tr>
</tbody>
</table>

202013 programme targets

Nutrition
- 300,000 children aged 6 to 59 months affected by SAM admitted for treatment
- 900,000 mothers and caregivers accessing infant and young child feeding counselling

Health
- 780,500 children under 1 year vaccinated against measles14
- 987,700 children under 5 years accessing integrated management of childhood illness services15

WASH
- 360,000 people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene16
- 100,000 people accessing and using adequate sanitation facilities and living in environments free of open defecation
- 1,500,000 people benefiting from water disinfection and operation and maintenance of drinking water supply services
- 1,500,000 people reached with messages on appropriate hygiene practices

Child protection
- 208,000 children accessing mental health and psychosocial support
- 120,000 women and children reached with gender-based violence prevention, risk mitigation and response interventions
- 8,600 registered unaccompanied/separated children supported with reunification services

Education
- 134,000 children aged 5 to 17 years accessing formal or non-formal education
- 404,215 children aged 5 to 17 years receiving individual learning materials17
NUTRITION

| Children aged 6 to 59 months with SAM admitted for treatment | 225,000 | 53,514 | 300,000 | 128,173 |
| Caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling | 500,000 | 186,045 | 720,000 | 499,149 |

HEALTH

| Boys and girls under 1 year receiving the first dose of measles vaccination | 759,820 | 509,079 |
| Children under 5 years accessing integrated management of childhood illness services | 914,251 | 762,750 |

WATER, SANITATION AND HYGIENE

| Affected people with access to safe drinking water | 660,000 | 495,421 | 360,000 | 152,751 |
| Affected people with access to safe means of excreta disposal | 370,000 | 29,766 | 235,000 | 22,355 |
| Affected people reached with hygiene messages and sensitization activities | 1,800,000 | 336,157 | 2,000,000 | 743,840 |

CHILD PROTECTION

| Boys and girls receiving psychosocial support | 443,461 | 94,923 | 216,273 | 210,940 |
| Registered unaccompanied/separated children supported with reunification services | 5,600 | 9,338 | 7,632 | 4,837 |
| Women and children reached with violence prevention and response interventions, including for sexual and gender-based violence | Not applicable | Not applicable | 120,440 | 136,378 |

EDUCATION

| School-aged boys and girls accessing safe learning spaces | 114,000 | 111,214 | 147,454 | 38,711 |
| Children who have received education-in-emergencies supplies and recreational materials | 384,800 | 472,815 | 372,356 | 113,074 |

1 Results are as of 31 August 2019.
2 UNICEF targets are higher than sector targets because the sector targets were not updated at the time of revising the 2019 Humanitarian Action for Children appeal.
3 UNICEF has shifted the focus of interventions in emergency-affected areas to more durable solutions such as Community-Led Total Sanitation under the development programme, which promotes construction and maintenance of latrines by affected communities.
4 This includes community awareness raising activities and specialized counselling through psychosocial support service points.
5 The sector targets and results exclude the refugee caseload, and as a result, UNICEF’s targets and results exceed the sector target. This indicator has been revised to align with the Core Commitments for Children and the Minimum Standards for Child Protection in Humanitarian Action.
6 This indicator/target was introduced in the second quarter of the year. The result also includes prevention of and response to violence against children. By mainstreaming psychosocial support in different settings and other sectors (health, education, justice, community), UNICEF and partners have been able reach more children at a lower cost.
7 The socio-political unrest in the Sudan since December 2018 has had a significant impact on enrolment/retention activities. Due to the increased intensity of demonstrations and the involvement of students, which has led to child deaths and injuries, the Transitional Military Council closed all schools in the Sudan on 5 August. The schools remained closed as of the reporting date.

Funding requirements

UNICEF requires US$147.1 million to reach children and women affected by the humanitarian situation in the Sudan in 2020. The appeal is slightly higher than the revised 2019 requirement of US$142.2 million because UNICEF is expecting to cover protracted and new humanitarian needs, including outbreaks, floods and an increase in urban poverty. Funding requirements also reflect the new Government’s prioritization of the health, nutrition and education sectors. UNICEF is grateful to all donors that contributed to the 2019 Sudan Humanitarian Action for Children appeal and looks forward to continued partnerships in 2020.

<table>
<thead>
<tr>
<th>Sector 2019 targets</th>
<th>Sector total results</th>
<th>UNICEF 2019 targets</th>
<th>UNICEF total results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>49,017,960</td>
<td>Health</td>
<td>25,393,608</td>
</tr>
<tr>
<td>Water, sanitation</td>
<td>25,345,000</td>
<td>Hygiene</td>
<td>12,632,498</td>
</tr>
<tr>
<td>Child protection</td>
<td>33,223,430</td>
<td>Education</td>
<td>1,500,000</td>
</tr>
<tr>
<td>Total</td>
<td>147,111,496</td>
<td></td>
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</tbody>
</table>

2 This figure is provisional and will be updated once the 2020 humanitarian needs overview/humanitarian response plan documents are finalized. Office for the Coordination of Humanitarian Affairs, ‘Sudan: 2020 Humanitarian Needs Overview’, OCHA, 2019.
5 Under international Health Regulation 2005, the Government unofficially declared a cholera outbreak on 7 September and Rift Valley fever in the Red Sea State on 4 October.
6 This includes targeted localities in Darfur, Kordofan, Nile and the Eastern states of the Sudan.
7 Sudan: 2019 Humanitarian Needs Overview.
8 Available funds include US$33.75 million received against the 2019 appeal and US$19 million carried forward from the previous year.
9 This figure is provisional and will be updated once the 2020 humanitarian needs overview/humanitarian response plan documents are finalized. ‘Sudan: 2020 Humanitarian Needs Overview’ (draft).
10 Ibid.
11 This includes the total number of children to be reached (see endnote 12); 900,000 mothers and caregivers targeted for infant and young child feeding counselling; and 375,000 adult men targeted to benefit from water disinfection and the operation and maintenance of drinking water supply services. The total includes 1,561,700 men/boys and 1,308,300 women/girls.
12 This includes 987,700 children under 5 years targeted for integrated management of childhood illness services; and 404,215 children aged 5 to 17 years targeted to receive learning materials.
13 The total includes 714,000 boys and 666,000 girls.
14 Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.
15 This is the overall target for the country and includes internally displaced persons, refugees and vulnerable children under 1 year.
16 Seventy per cent are targeted for integrated management of childhood illness services. The target includes internally displaced persons, refugees and vulnerable residents.
17 This includes 5,600 children under 2 years of age targeted for vaccination.
18 Figures are provisional estimates. Financial requirements are subject to change upon finalization of the inter-agency appeals/planning documents.