



Before and after UNICEF WASH support: Muhajeriya, Yassin Locality-East Darfur State

Reporting Period: 1 January to 31 March 2022

Sudan

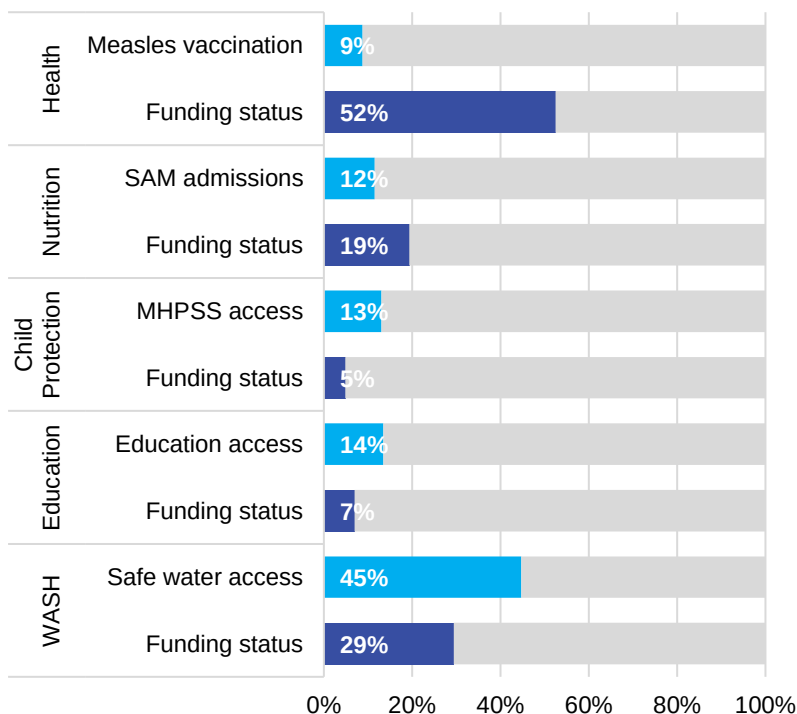
Humanitarian Situation Report No. 1

January – March 2022

Highlights

- Humanitarian needs continue to grow across Sudan, driven by a political and economic crisis, increased insecurity and localised violence in parts of the country, protracted internal displacement that is yet to find durable solutions, coupled with dry spells, floods, and disease outbreaks. In Sudan, the combined effects of conflict, economic crisis, and poor harvests will likely lead to 18 million people facing acute hunger by September 2022, including 650,000 children suffering from severe acute malnutrition
- UNICEF provided access to lifesaving basic water services for 1,117,443 conflict, flood, and epidemic affected people (including 593,601 female and 536,373 children) in 11 states. Of these, 88,500 were provided with durable water sources through the construction/rehabilitation of 140 gender sensitive basic water sources.
- UNICEF supported in the mid-upper arm circumference screening of 514,600 children with 38,078 children identified with Severe Acute Malnutrition and provided wasting management interventions. 1,002 frontline nutrition staff and 533 community volunteers received Community-Based Management of Acute Malnutrition training. 1,843 volunteers were trained on community IYCF counselling and 785 staff trained on Facility level IYCF counselling services. 16,380 Mothers of SAM children were trained on Family MUAC approach.

UNICEF's Response and Funding Status

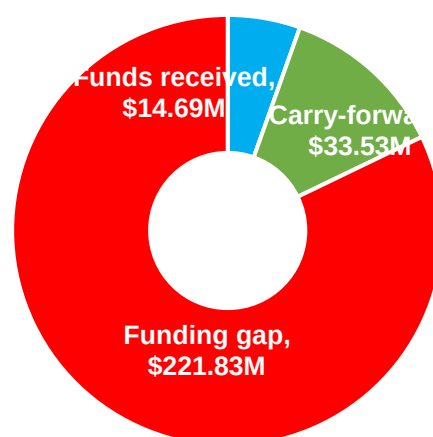


Situation in Numbers

- 7.8 million** children in need of humanitarian assistance (OCHA HNO 2022)
- 14.3 million** people in need (OCHA HNO 2022)
- 1.58 million children** Among 2.87 m Internally displaced people (IDPs) (OCHA HNO 2022)
- 423,759 children** Among 799,545 South Sudanese Refugees (UNHCR SSR in Sudan 2022)

UNICEF Appeal 2022

US\$ 270 million



*Funding available includes funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.

Funding Overview and Partnerships

UNICEF's 2022 Humanitarian Action for Children (HAC) appeal for Sudan requires \$270 million to break the cycle of vulnerability, deliver key health and nutrition services to prevent and treat epidemics such as measles and COVID-19, chronic and acute malnutrition among children under five and pregnant and lactating women, improve water and sanitation access, educate the next generation of Sudanese and protect children from the risks threatening their well-being.

UNICEF Sudan would like to express sincere appreciation to the donors that continue supporting the humanitarian appeal in Sudan. In 2022, the humanitarian response has to date been supported by the European Union, the United States, Japan, Germany, Canada, as well as by significant contributions from the Central Emergency Response Fund (CERF) and the Sudan Humanitarian Fund (SHF), and UNICEF National Committees.

At the end of March 2022, UNICEF faced a \$221,830,740 (82%) funding shortfall (aside from COVID-19 response requirements), curtailing relief efforts against flooding, disease outbreaks, conflict, and the nutrition crisis, and leaving education, health, nutrition, child protection and Water, Sanitation and Hygiene (WASH) needs unaddressed.

For this year, humanitarian partners aim to provide humanitarian assistance and support to 10.9 million of the most vulnerable people at the cost of US\$1.9 billion. So far, the plan received \$166 million, which is 7.7 per cent of requirements. UN agencies and humanitarian organizations continue advocating for timely and flexible funding for humanitarian operations as conflict, the economic crisis, inflation, food insecurity and other challenges increase the needs of vulnerable people. UNICEF in close collaboration with Government of Sudan and Humanitarian partners continue to assist millions of vulnerable people across the country taking the lead in nutrition, WASH, Education and child protection sectors.

Situation Overview & Humanitarian Needs

Sudan continues to face a complex humanitarian situation with multiple and compound crisis. The humanitarian needs are anticipated to grow as the economic crisis and food insecurity affect millions of people, while the system providing social services is becoming dysfunctional due to the current political crisis and funding shortage. 14.3 million people across the country, almost a third of the population, require humanitarian assistance. It is estimated that eight million children remain under protracted pressure from conflict, intercommunal violence, displacement, nutritional deprivation, flooding and epidemics.

The overall political situation remains fluid, and the country is facing a continuing economic downturn which has worsened since the military takeover in October 2021, when Sudanese government lost a great part of its international financial assistance. During the reporting period, markets experienced a remarkable increase in the prices of fuel, food, and supply shortages of basic goods, including medicine, wheat and agricultural inputs. The increase in fuel prices is contributing to increase in living and transportation costs, compounding an already dire food security situation across the country. During 2021 and as a result of 84 conflict related incidents across the country, 442,427 Individuals have been displaced deteriorating further their living conditions and compromising access to lifesaving services. During the reporting period, a wave of security incidents took place, including attacks on and looting of warehouses/premises of humanitarian organizations, robberies, and theft in Darfur. These acts of violence are affecting the timely delivery of humanitarian assistance to the most vulnerable people in Sudan. The aforementioned increased risks make imperative the need for flexible support so as to prevent further deterioration of the humanitarian crisis in Sudan. At the same time, Sudan has always been a dynamic programming environment and 70 years of in-country experience has taught UNICEF to be agile and able to pivot between implementation modalities, to make sure services continue to reach children in need.

Consolidated Approach to Reporting Indicators of Food Security (CARI), the forecasted scenario indicates that 33 per cent of the general population are food insecure during the first quarter of 2022, and 39 per cent will be food insecure by the third quarter. The dry spell and the subsequent crop failure have affected over 5.6 million people in Blue Nile, Central Darfur, East Darfur, East Darfur, Gedaref, Kassala, North Darfur, North Kordofan, Red Sea, Sennar, South Darfur, South Kordofan, West Darfur, and White Nile. More than 22 million people (50 per cent of Sudan's population) live in the 115-dry spell-affected localities. The nutrition situation is projected to deteriorate further whereby caseload of acute malnutrition caseload is projected to increase by 10% especially in 115 dry spell localities where half of the acute

malnourished children live¹. Consequently, children's health is likely to be deteriorated and relevant outbreaks of waterborne diseases are expected to spike. Further inadequacy of food is likely to disproportionately affect girls who are often experiencing child/early marriage and drop out of school due to the economic hardship families are facing.

The 2022 WASH HNO already indicated 11 million people in WASH need which is further going to deteriorate. Out of the 115 dry spell localities identified by Food Security Livelihood sector, 27 localities are part of the very high WASH severity category and 74 localities are part of the high severity category. There are at least 2 million people who need urgent support in terms of access to water. The slippage of people to these categories is expected to increase quickly as the dry spells will dry/deplete the wells, bore holes and other improved water sources which depend on rainwater recharge. UNICEF Sudan has conducted a vulnerability mapping to focus and prioritize efforts where they are most needed in a context where resources are shrinking. UNICEF is continuing to prioritize taking a programme criticality, vulnerability, conflict, and gender sensitive approach.

Development partners are called upon to ensure that systems for delivering lifesaving and life-sustaining services at scale remain resilient. Civil servants/frontline workers – such as doctors, nurses, midwives, social workers and teachers - are essential resources for continued essential service delivery at scale, in the fragile context of Sudan that can help communities and children absorb and manage shocks and stresses, ensure behavioral change in practice for the children of Sudan. UNICEF Sudan has successfully (re-) activated partnerships to deliver relevant services, implemented direct cash transfers and implemented MCCT+ to reach the most vulnerable individuals in a very short timing.

Summary Analysis of Programme Response

Health

Hepatitis E, Rift Valley Fever and Malaria persist in Sudan while COVID-19 and polio are likely to become endemic in 2022. As part of the immediate response to medicines, food, and fuel shortages, UNICEF is supporting the continuity of lifesaving health and nutrition interventions including provision of health services and essential medicines addressing the needs of vulnerable population with a focus on maternal and child health. Long Lasting Insecticide Treated Nets (LLITNs) will be distributed to some 36,700,000 people in 13 high burden states including emergency affected ones while anti-malaria drugs will be distributed to cover the entire population in Sudan.

UNICEF continues to support the provision of Primary Health Care services as part of the Tigray response in Gedaref and Kassala states. , During the reporting period, a total of 48,078 people including 15,673 children under five were reached with integrated primary health care services. UNICEF also supported the yellow fever and OCV vaccination campaigns during the period 29th March to 1st April in Um Rakoba, Tenaidda and V8 refugee camps in Gedaref state. 36,497 refugees in addition to 18,368 host community members, all above 1 year old, received OCV while 33,233 refugees received YF vaccination.

With the support of UNICEF, Federal Ministry of Health (FMOH) procured around 14million doses of various types of C-19 vaccines in Sudan. Up to April 2022 Sudan has reached 13.24% with at least one dose and 7.7 % with two doses (fully vaccinated). FMOH used both the campaign and routine services to rollout C-19 vaccination in the country. During this quarter, as part of preparedness and response, UNICEF country office secured 50,000 RT-PCR tests, isolation kits and sample collection kits and 100,000 Ag RDTs kits, arriving in the upcoming weeks, to facilitate the aspects of early detection and contact tracing of COVID-19 cases in anticipation of any surge of cases in Sudan.

Sudan is facing multiple outbreaks of dengue fever, Hepatitis E, scabies, and an increase in confirmed cases of Malaria and COVID-19. UNICEF Sudan has supported the FMOH to develop the National Multi-Hazard preparedness and response plan and the 2021 after floods action review to guide this year's preparation. UNICEF distributed over 7,332 of various medical kits, supplies and equipment for Emergency Obstetric and Newborn Care departments in Health care facilities, enough to cover 12,900 deliveries, including almost 2,000 with complications and 1000 Cesarean sections.

During the first quarter of 2022, measles cases continued to rise with a total of 422 confirmed cases up to the end of April compared to 17 cases in the same period in 2021 affecting 5 states. UNICEF continues supporting the ongoing country efforts to curb the progress of measles outbreaks. Up to February 2022, 193,999 children less than one year of

¹ Results from some of the SMART surveys conducted between February and April 2022 indicate deterioration of the admissions in 2022 compared to the results in 2018.

age received first dose of measles vaccine and 147,057 children received two doses. Relevant response activities include case management, communication and social mobilization, strengthening routine vaccination and mass vaccination campaign. 109,137 children 6-59 months received Vitamin A supplementation within the measles campaign while 14,815 Pregnant women received Iron and Folic acid supplementation.

Given the drastic health emergencies currently facing the country, a sustained power system for the Federal Ministry of health – Emergency and Humanitarian Response Directorate is of high importance in maintaining the main functions of emergency management and coordination. Responding to this need, UNICEF established a full solar electrification system for the directorate, using clean sources of energy to address the continued power outages caused by fuel shortages.

Nutrition

As per the UNICEF Sudan 2022 Humanitarian Action for Children (HAC) appeal, 330,000 children under five (51 percent female) with SAM are targeted by UNICEF and its implementing partners. Almost 514,600 children have been screened so far with 38,078 children identified with SAM and provided wasting management interventions (as per Jan.-Feb. data). Children are treated in 1,872 Outpatient Therapeutic Programmes (OTP) centres across Sudan, of which 1,797 are fixed sites, 69 are mobile sites and 6 are satellite sites. 138,350 pregnant and lactating women received counselling on proper IYCF practices through facility and community level counselling services.

UNICEF continued to build the Nutrition capacity of personnel and facilities in Sudan. 1,002 frontline nutrition staff and 533 community volunteers received Community-Based Management of Acute Malnutrition (CMAM) training. 1,843 volunteers were trained on community IYCF counselling and 785 staff trained on Facility level IYCF counselling services. 16,380 Mothers of SAM children were trained on Family MUAC approach, bringing the total number of mothers trained to 112,434.

The quality standards of warehousing conditions where Nutrition and Health supplies are stored is critical for programme delivery. Thus, during the first quarter of the year, twelve additional warehouses were fully rehabilitated bringing the total number of fully rehabilitated warehouses to forty-eight in East Darfur, Gedaref, Kassala, North Darfur, Red Sea, South Darfur, South Kordofan, West Darfur, West Kordofan. UNICEF continued its support to the FMOH/ SMOHs and partners in managing the supply chain for nutrition commodities to treat children with Severe Acute Malnutrition. In quarter one, UNICEF distributed 820 metric tons of nutrition supplies across the 18 states, including ready-to-use therapeutic food (RUTF), anthropometric measurements equipment, OTP drugs, therapeutic milk and ReSoMal. As part of the preparedness measures, UNICEF pre-positioned 945 metric tons of nutrition supplies to states affected by the rainy season and emergencies to ensure continuity of life-saving nutrition services.

Child Protection

UNICEF continued to provide Mental Health and Psycho-Social Support (MHPSS) services in the first Quarter of 2022, reaching in total 43,957 people, including 21,836 boys, 22,116 girls. Out of this total 31,026 are IDPs (14,897 boys, 16,124 girls, and 5 women), 4,491 are Refugees (2463 boys and 2028 girls) and 8,440 (4,476 boys and 3,964 girls) belong to the host community.

During the reporting period, UNICEF and partners have provided prevention and response services such as legal, medical, and MHPSS to 6,613 survivors and/or people at risk of Gender-Based Violence (GBV). Out of this, 2,744 are IDPs (1,333 boys, 1,220 girls, 5 men, and 186 women), 3,056 are Refugees (1,653 boys, 1,284 girls, and 119 women) and 813 are residents (401 boys, 412 girls). These interventions were conducted taking a survivor-centered approach. 17,485 people had access to safe channels to report sexual exploitation and abuse by aid workers including 7283 boys, 7322 girls, 530 men, and 2350 women.

572 Unaccompanied and Separated Children (UASC) were identified and reunified with their families or placed in alternative family care. These reunifications and placements were based on an individual assessment of each child taking into consideration their physical safety and social and emotional wellbeing, and the principle of the best interest of the child.

Education

The first quarter of 2022 continued to be impacted by civil disobedience, demonstrations and teacher strikes arising from the current political and economic situation in Sudan. During the reporting period, schools in Sudan were primarily open; however, many states were impacted by intermittent teacher's strikes (1-2 weeks in duration) due to issues

regarding their salaries (such as allegedly late payments). As of March 2022, strikes are still ongoing and schools in some states are closed without a clear reopening date.

From January to March 2022, UNICEF distributed teaching and learning materials to 90,367 students (44,450 boys and 45,917 girls) in the states of Kassala, Gedaref, West Darfur, White Nile, South Kordofan and West Kordofan to support continuity of learning, completion of the school year, and transition examinations for Grades 1 to 8. These included student kits, teacher kits, recreational kits, blackboards, school benches, school uniforms, plastic mats, tarpaulins, and tents.

A total of 89,100 out-of-school children (43,539 boys and 43,101 girls) received support from UNICEF to gain access to formal and informal education opportunities. Furthermore, to improve learning environments, UNICEF constructed 25 permanent classrooms, 21 temporary/semi-permanent classrooms, as well as 27 latrine units, and rehabilitated 132 permanent classrooms as well as 29 latrine units in Khartoum, Gazira, Kassala, East Darfur, West Darfur, and South Kordofan.

WASH

Out of 12.1 million people were identified as in need of WASH assistance², including 5.8 million girls and boys and 3.1 million adult women, the WASH Sector is targeting 4.7 million most affected population. UNICEF is targeting 2.5 million conflict, floods, drought, COVID-19 and other epidemics affected population³, mainly in North, South, East, West and Central Darfur, South, West and North Kordofan, Blue Nile, White Nile, Sennar, Red Sea, Kassala and Gedaref States.

In quarter one of 2022, the UNICEF WASH provided 1,117,443 conflict, flood, and epidemic affected people (including 593,601 females and 536,373 children) with access to lifesaving basic water services in the five Darfur states, South and North Kordofan, Blue Nile, Sennar, White Nile, Red Sea and Gedaref states. Of these, 88,500 were provided with durable water sources through the construction/rehabilitation of 140 gender sensitive basic water sources. The rest (1,028,945) were provided with water disinfection, operational and maintenance support for their existing water facilities or water trucking. The recipients were 1,097,043 IDPs, COVID-19 and flood and other emergency affected population and 20,400 Ethiopian and South Sudanese Refugees.

13,920 conflict, flood and epidemic affected people (including around 7,149 females and 6,682 children) in North, East and West Darfur, South and North Kordofan and Blue Nile States were provided with access to adequate sanitation facilities (1,419 adequate gender sensitive latrines). Those were 12,720 IDPs and COVID-19, flood and other emergency affected population, and 1,200 Ethiopian Refugees.

239,908 conflict, flood, and epidemic affected/at risk population (including around 110,148 females and 115,116 children) were reached with hygiene promotion interventions with a focus on handwashing with soap and COVID-19 infection prevention and control communications in North, South, East and West Darfur; South Kordofan, West Kordofan, Blue Nile and White Nile states. Within the above reached population, 23,511 women and girls were reached with menstrual hygiene management services.

The main challenges currently facing WASH programme are the country's severe political instability with its consequent restricted release of funds to the government implementing partners and the country's deteriorated economic situation.

Cash-based Programming

Sudan's democratic transition was hampered by the military takeover in October 2021. The ongoing political crisis in Sudan worsened the economic hardship. The Sudanese government lost most of its international assistance and there is a growing fear of Sudan returning to international isolation. The 2022 budget included further removal of subsidies, without incorporating measures to support deprived households. Lack of an effective social protection system, the ongoing COVID-19 crisis, dry spells and intercommunal clashes only worsened the conditions and made interventions like multi-purpose humanitarian cash transfers (MCCT+) more needed than ever. Five of the nine localities targeted by MCCT+ are in Red Sea and Kassala among those affected by the dry spells.

Since April 2021, UNICEF has worked with partners to roll out a Mother and Child Cash Transfer Plus (MCCT+) programme, an innovative cash plus programme that combines cash payments with social behavior change

² 2022 Humanitarian Needs Overview

³ Humanitarian Action for Children 2022

communication and links with basic services for the first 1,000 days of life. By January 2022, the programme registered more than 50,000 pregnant women from nine localities, serving 300,000 household members. Of those, more than 17,000 women received their cash entitlement up to the month of March 2022. This figure reflects on both individuals and households benefiting from this support.

Social and Behavior Change

UNICEF Social and Behavior Change (SBC) continued to engage in the response to the COVID-19 pandemic and other disease outbreaks. During this reporting period, there was a particular focus on ensuring adequate uptake of COVID-19 vaccinations through acceleration campaigns, through measures proven to be most effective in increasing the number of persons vaccinated, including household visits, increasing the working hours of vaccination centers and expanded engagement through mass and social media.

During the first quarter, UNICEF and partners developed COVID-19 guidelines for Schools in Sudan. This document aims to clearly define the measures to be taken within the school system in response to the rising incidence of Covid among school teachers and the pupils.

Activities for the Joint EU funded project between UNICEF and UNITAMS on 'Restoring Peaceful coexistence Between Communities in West Darfur' commenced with the aim of implementing social mobilization and community engagement activities that promote peaceful resolution of conflict.

UNICEF dedicated to implement interventions with long-term impact, has developed a number of projects to promote adoption of positive practices in health, Nutrition, school enrollment and consumption of safe water. More specifically, approximately 20 Training of Trainers were conducted targeting data collectors, health promoters, platform leaders, community volunteers, media personnel, religious leaders and frontline workers, who were trained in data collection, theatre and drama, community radio skills and use of social and mass media. In total, 635 persons were trained (289 Males and 346 Females). A variety of methods were used to reach communities ensuring two-way communication, through the use of mobile megaphones at locality level, announcements through mosques, orientation sessions, community discussions and theatre and school activities, reaching of 181,649 individuals (85,991 male and 95,658 female). In addition, 174,177 people were engaged through household visits. A total of 9,304 communication material items were produced ranging from booklets, posters, pamphlets, leaflets, flip charts and banners, to sign posts, t-shirts, bags and baby towels.

The challenges during the implementation included high turnover among governmental staff, the resignation of the undersecretary of the FMoH for Health Promotion at State Level, frequent protests, a fluid situation of the country and a short shelf life of COVID-19 vaccines, as well as the lack of a ministerial cabinet to support COVID-19 vaccines uptake.

Humanitarian Leadership, Coordination and Strategy

UNICEF co-leads the Child Protection AoR, and Education, Nutrition and WASH Sectors. They are all part of the Inter-Sector Working Group (ISWG) led by OCHA, and with regular coordination in place at the national and sub-national levels in 14 states. UNICEF participates in the in-country interagency PSEA Task Force, Access working group and refugee coordination forum at national and state level and contributes to the UNHCR led refugee fora.

WASH Sector is continuing to coordinate response to chronic humanitarian needs and new threats, especially dry spells. During the period, the sector supported half a million people with continued access to improved water (using new installation, rehabilitation, operation, and maintenance), and similarly a half million people were provided with continued access to basic sanitation (by means of new installation, rehabilitation, operation, and maintenance).

CP AoR, together with UNICEF, National Council of Child Welfare and partners launched Primero, a mobile application for case management, which will strengthen accountable and professional case management and social services for children even in the most challenging circumstances. More than 20 UN and NGO partners have subscribed to the Primero/ CPIMS+, which will cover 10 states and an estimated caseload of 35,000 children at risk in Sudan. The CP AoR participated in missions on Multi Sectoral Rapid Needs Assessment through active Community Based Protection Networks (CBPNs) in affected communities in West Darfur state in the first quarter of 2022. The findings indicated the prevalence of child protection issues in the assessed areas, which include Unaccompanied and Separated children, grave child rights violations including risk of child recruitment, prevalence of child labor, early marriage and unusual behavior such as stress, trauma, sleep disorders and loss of appetite among a high number of children. The CP AoR in consultation with the Protection and GBV AoR have included a safety audit indicator in the 2022 HRP process under

the Strategic Objective and have used the results of the safety audits conducted in the last quarter, to inform the Humanitarian Country Team Centrality of Protection strategy.

During the first quarter, the nutrition sector started tracking monthly new admissions for Severe Acute Malnutrition (SAM) with and without medical complications as well as moderately malnourished children. A total of 51,710 cases of children with Severe Acute Malnutrition (SAM) were enrolled in outpatient therapeutic feeding programme (OTP) representing 16 % of the annual sector target of 320,864 with over 80% reporting rate.

The nutrition sector projected that in view of the evolving dry spell in 115 localities, the acute malnutrition caseload is projected to increase by about 10% and is scaling up the response. Additional resources have been estimated to be needed in order to meet the increased caseload for life-saving interventions (SAM, SAM with medical complications, moderate acute malnutrition among under-fives and PLW)

The Education Sector targets supporting 2.28 million vulnerable children with emergency education interventions in 2022 against a financial requirement of \$102.46 million dollars, of which only 7.9% was mobilized. WFP alerted that funds for school feeding will only cover up to November 2022. Implementing education interventions experienced delays due to suspension of working directly with government counterparts. Alternate modalities were applied including direct implementation and developing partnerships with national/International NGOs which took some time to start. Several advocacy efforts with federal and state ministries of education were suspended. Those included Girls' Education Strategy, Inclusive education Strategy, Global Partnership for Education (GPE) fund for COVID-19 Response as well as Local Education Group (LEG) development coordination structures. The current deteriorating situation in the country coupled with limited resources mobilized for the education interventions might result in increased drop out of students from schools with the increased cost of living and burden on vulnerable households.

Human Interest Stories and External Media

The opinion of every child matters: Voices of Children of Sudan are depicted in a [Speech](#) and a [video](#) titled "If I were President". Additionally, a story of a former child soldier, [Younis](#), is shown in an animation video.

Next SitRep: 30 July 2022

UNICEF Sudan: www.unicef.org/sudan **UNICEF**

Sudan Facebook: <https://www.facebook.com/UnicefSudan>

Sudan Humanitarian Action for Children: <https://www.unicef.org/appeals/sudan.html>

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Summary of Programme Results

			UNICEF and IPs Response			Cluster/Sector Response		
Sector		Overall needs	2022 target	Total results	Change*	2022 target	Total results	Change*
Indicator	Disaggregation							
Health ⁴								
children under one year old vaccinated against measles	IDPs, Returnees, Vulnerable, Residents		908,328	79,416	N/A			
	Refugees		52,872	5,069	N/A			
	Total		961,200	84,485 ⁵	N/A			
children under 5 years accessing IMCI services	IDPs, Returnees, Vulnerable, Residents		1,025,018	115,260	N/A			
	Refugees		97,152	10,023	N/A			
	Total		1,222,200	125,283 ⁶	N/A			
Nutrition ⁷								
children aged 6 to 59 months with severe acute malnutrition admitted for treatment	IDPs, Returnees, Vulnerable, Residents	3,6 million	306,900	35,413	N/A	320,864	51,710	N/A
	Refugees		23,100	2,665	N/A			
	Total		330,000	38,078 ⁸	N/A			
primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	IDPs, Returnees, Vulnerable, Residents		920,700	128,666	N/A	495,780	138,350	N/A
	Refugees		69,300	9,685	N/A			
	Total		990,000	138,350 ⁹	N/A			

⁴ Relevant data concern only January and February due to constraints of the relevant reporting mechanism.

⁵ Due to COVID-19 and protracted conflicts implications the immunization system in Sudan currently is low performing in routine and emergency responses. This year response strategy to measles/rubella outbreaks is to conduct small scale SIAs/acceleration campaigns and response to outbreaks along with Vitamin A distribution targeting children under 5/under 15 in affected localities. UNICEF, WHO, FMoH with the support of GAVI are planning the National Measles Rubella (MR) Immunization Campaign targeting population under 15 years old.

⁶ Political instability and significant turnover in Ministry of Health Management at all levels is affecting overall health system with lack of supportive supervision, monitoring system, freezing DCTs to Government from November 2021 with the suboptimal supply and service delivery resulted in low coverage by the OMCI, iCCM activities at community and PHC levels. Additionally, the poor health information management & reporting system resulted in underreporting in most cases from states to central level.

⁷ Relevant data concern only January and February due to constraints of the relevant reporting mechanism.

⁸ Nutrition treatment targets are not assumed to be equally distributed on quarterly basis. During May to September, SAM admissions are the highest due to the hunger gap, while it is relatively low during the first quarter of every year. Moreover, lack of funds to support mobile OTP services is another contributing factor to the low coverage.

⁹ Counselling coverage in the first quarter is close to the coverage in the same period from last year (93% of last year's coverage). Mothers are usually occupied with farm work during the harvest period which extends to the first quarter each year. Moreover, COVID-19 appropriate measures are now imposed on group counselling by Mother Support Groups, with number of session attendees reduced by almost 40%.

Child Protection, GBVIE & PSEA ¹⁰								
Children and parents/caregivers accessing mental health and psychosocial support	IDPs, Returnees, Vulnerable, Residents	2,56 million	317,340	39,466	N/A	915,339	52,475	N/A
	Refugees		20,260	4,491	N/A			
	Total		337,600	43,957 ¹¹	N/A			
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	IDPs, Returnees, Vulnerable, Residents		59,501	3,557	N/A	38,000	21,708	N/A
	Refugees		3,799	3,056	N/A			
	Total		63,300	6,613 ¹²	N/A			
People who have access to safe channels to report sexual exploitation and abuse by aid workers	Girls		2,199,900	7,322	N/A	38,900		
	Boys			7,283	N/A			
	Adults			2,880	N/A			
	Total			17,485	N/A			
Unaccompanied and separated children accessing family-based care or a suitable alternative	IDPs, Returnees, Vulnerable, Residents		11,934	439	N/A	333,000	3.845	N/A
	Refugees		766	133	N/A			
	Total		12,700	572 ¹³	N/A			
Education								
children accessing formal and non-formal education, including early learning	IDPs, Returnees, Vulnerable, Residents	2.7 million	607,628	87,436	N/A	2,278,492	112,277	N/A
	Refugees		52,272	1,664	N/A			
	Total		659,900	89,100 ¹⁴	N/A			
Schools implementing safe school protocols (infection prevention and control)	Total		3,452	0 ¹⁵	N/A	23,873	0	N/A

¹⁰ Child Protection is severely underfunded in 2022 as it received 5 per cent of the relevant requirement needed to reach its targets.

¹¹ Political instability and sporadic clashes have resulted into increasing inaccessibility of locations that UNICEF has planned to conduct interventions reaching the most vulnerable children.

¹² The reporting system is yet to be strengthened and made accessible at all levels. Additionally, the taboos around GBV are still persisting despite the ongoing awareness raising work. Lack of dignity Kits and expertise of local actors on GBV puts further constraints on service provision and prevention from GBV. UNICEF in coordination with the GBV Sub-sector is strengthening relevant interagency organizational capacities providing further capacity building activities on case management and change behavioral norms regarding Gender Based violence.

¹³ Due to the continuous ongoing armed clashes, access to all the affected areas on the way to assess, report and respond accurately remain a key challenge.

¹⁴ The support to Out-of-School Children for the 2022-2023 academic year will start in the third quarter of the year. The low reach is due to the programme cycle of education intervention which is aligned with the national academic calendar.

¹⁵ UNICEF completed supporting safe school protocols for the 2021-2022 academic year during the last quarter. To continue supporting schools to implement safe school protocols for the 2022-2023 academic year, UNICEF will start distribution of COVID-19 kits and TPT training from September 2022.

children receiving individual learning materials	IDPs, Returnees, Vulnerable, Residents		607,628	79,299	N/A	2,278,492	87,467	N/A
	Refugees		52,272	11,068	N/A			
	Total		659,900	90,367 ¹⁶	N/A			
WASH								
people accessing a sufficient quantity of safe water for drinking and domestic needs	IDPs, Returnees, Vulnerable, Residents	7,98 million	2,250,000	1,097,043	N/A	1,876,000	554,357	N/A
	Refugees		250,000	20,400	N/A			
	Total		2,500,000	1,117,443 ¹⁷¹⁸	N/A			
people use safe and appropriate sanitation facilities	IDPs, Returnees, Vulnerable, Residents		90,000	12,720	N/A	1,790,000	506,146	N/A
	Refugees		10,000	1,200	N/A			
	Total		100,000	13,920 ¹⁹²⁰	N/A			
people reached with hand-washing behaviour-changed programmes	IDPs, Returnees, Vulnerable, Residents		2,300,000	239,908	N/A	4,710,000	641,878	N/A
	Refugees		200,000	0	N/A			
	Total		2,500,000	239,908 ²¹²²	N/A			
Social Protection								
households reached with UNICEF funded multi-purpose humanitarian cash transfers	Total		100,000	17,655	N/A			
Cross-Sectoral (C4D, RCCE and AAP)								
people reached through messaging on prevention and access to services	Total		643,700	144,870	N/A			

¹⁶ Most of the teaching and learning materials for the 2021/2022 academic year were distributed during the third and the fourth quarter of in 2021. UNICEF will distribute teaching and learning materials for the 2022/2023 in Q3 and Q4 in 2022. The low reach is due to the programme cycle of education intervention which is aligned with the national academic calendar.

¹⁷ From which 593,601 are female and 536,373 children.

¹⁸ Over achievements were a result of massive preventive water chlorination programme which was implemented in the first quarter of 2022.

¹⁹ From which 7,149 are female and 6,683 children.

²⁰ The initial target could not be reached due to WASH lack of funding IN 2022 which received 29 per cent of the relevant requirement needed to reach its targets.

²¹ From which 110,148 are female and 115,116 children.

²² The under achievements were a result of less planned/implemented hygiene promotion interventions in the first quarter of the year. Focus on relevant interventions will be in the second quarter of the year.

Funding Status*

Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2022	Resources available from 2021 (Carry-over)	\$	%
Health	29,389,044	5,747,091	9,678,342	13,963,611	48%
Nutrition	59,793,941	2,617,718	8,961,336	48,214,887	81%
Child Protection	46,069,004	1,699,620	522,135	43,847,249	95%
Education	89,769,556	1,224,713	5,022,775	83,522,068	93%
WASH	33,384,000	2,136,031	7,677,837	23,570,132	71%
Social Protection	7,938,000	322,405	-	7,615,595	96%
Cross-Sectoral (C4D, RCCE and AAP)	3,702,460	938,739	1,666,522	1,097,199	30%
Total	270,046,005	14,686,318	33,528,947	221,830,740	82%