

On 2 May 2023, UNICEF partners delivered essential Water, Sanitation, and Hygiene (WASH) supplies to health facilities in El Fasher, Sudan, amid ongoing conflict. © UNICEF/UN0836599/Zakaria

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UNICEF Sudan Country Office

Humanitarian

Situation Report No. 2

unicef
for every child

Highlights

At least 551 people have been killed and 4,926 have been injured[1] in the fighting between the Sudanese Armed Forces (SAF) and paramilitary Rapid Support Forces (RSF) two and a half weeks in. It is believed that over 334,000 people have been domestically displaced, with over 100,000 fleeing to neighbouring countries[1]. Shortages of food, water, medicines and fuel continue, especially in Khartoum, while access to communications and electricity is limited in many parts of the country.

Less than half of the health facilities are operating in conflict affected areas. Federal Ministry of Health reported reactivation of 36 hospitals in Khartoum State, 14 health facilities in El Fashir, North Darfur State, and two specialized hospitals in Nyala, South Darfur. Majority of health facilities operate as usual in non-conflict areas and states. UNICEF supported health facilities in Khartoum with WASH supplies and El Fasher with water trucking.

Central cold chain in Khartoum for vaccines and critical medication, including insulin for children, has been affected by the conflict and unstable electricity supply. UNICEF has advocated to ensure connectivity to the electricity grid and provided fuel for back-up generators for the cold chain. UNICEF is advocating for safe passage of commodities to distribute the vaccines to parts of the country in need and where service provision is possible. In West Darfur state, immunization cold chain including vaccines and all assets have completed looted and damaged. This is the second attack on EPI Office following the incident in South Darfur.

Schools and educational institutions in conflict affected areas, namely Khartoum, Al-Gazera, South Darfur, West Darfur and West Kordofan, remain closed. In 12 relatively calm states public schools re-opened this week, some partially, with one more state re-opening next week.[1] This will allow students to take critical final academic year examination. UNICEF in partnership with Sudanese Red Crescent and other NGOs conducted an assessment on IDPs situation in Eastern States with ongoing efforts to provide WASH, Nutrition and Health supplies and services.

People in need
15.6 million
People to be reached
9.3 million

Children in need
8.5 million
Children to be reached
7 million

*Figures are from 2023 Humanitarian Response Plan and Humanitarian Action for Children. Inter-agency discussions underway on adjusting the figures to capture an acute PIN that will complement the existing HRP and HAC PIN. UNICEF has developed a draft response plan with an acute PIN of 5 million, however this is likely an underestimate.

Funding Overview and Partnerships

Additional humanitarian needs arising from the recent conflict are being thoroughly assessed as the situation allows. Before the conflict erupted, humanitarian needs across Sudan had reached record levels, with 15.8 million people—about a third of the total population—requiring humanitarian assistance (2023 Humanitarian Needs Overview).

Donors who wish to contribute to the Sudan response can do so against the existing UNICEF Sudan 2023 HAC requiring US$ 584.6 million for 2023; currently only 12 per cent funded. The HAC is based on the inter-agency Humanitarian Response Plan (HRP).

UNICEF is ready to step up response with $10 million in supplies already available in UNICEF's warehouses in Sudan and is distributing these where we can and is safe. In addition, we have $1 million supplies in Jeddah awaiting final clearance to be deployed to Sudan. We also have placed another $10 million order using a UNICEF bridge-fund / internal loan which we need to pay back in the near future. To meet urgent needs, we urgently need to place another order for $10 million, bringing initial total funding needs to $20 million.

We ask all our partners to

- Stand in solidarity with the children and vulnerable of Sudan;
- Allow for flexibility in use of existing funding, and the conditionalities through which they can be implemented to make sure we reach and support the frontlines with critical support;
- Where possible allocate new funding;
- Remain very vocal about the urgent need to meet the rights of every child, as the children of Sudan, are the future of a stable, peaceful, productive, and prosperous Sudan.

Situation Overview

At least 551 people have been killed and 4,926 have been injured[1] in the fighting between the Sudanese Armed Forces (SAF) and paramilitary Rapid Support Forces (RSF) two and a half weeks in. It is believed that over 334,000 people have been domestically displaced, with over 100,000 fleeing to neighbouring countries.

In conflict areas, more than half of the hospitals remain dysfunctional. Access to safe drinking water remains one of the main challenges. In Khartoum and other conflict affected areas face severe water shortages due to blackouts, lack of fuel and damage to water supplies. The situation increasing the risk of water-borne diseases, including cholera, while vector control efforts for mosquito-borne diseases (including dengue fever and malaria) could cause cases to rise, according to the Ministry of Health. Schools and educational institutions in conflict affected areas, namely Khartoum, Al-Gazera, South Darfur, West Darfur and West Kordofan, remain closed. Unconfirmed report of unexploded ordinances have emerged.

In the safe areas and where situation has calmed down, the efforts to sustain or resume provision of basic social services continue, along with the response to displaced population. Federal Ministry of Health reported reactivation of 36 hospitals in Khartoum State, 14 health facilities in El Fashir North Darfur State, two specialized hospitals in Nyala, South Darfur while majority main health facilities operate as usual in non-conflict areas and states. As the conflict continue in Khartoum State, Ministry of Health has temporary transferred its health sector operation with

[1] Federal Ministry of Health Report, 2nd of May

partners to Madani, the state capital of Gezira state, to activate physical cluster meeting. In 12 relatively calm states public schools re-opened this week, some partially, with one more state re-opening next week.[2] This will allow students to take crucial final academic year examination.

Even in areas without active conflict, sustaining service provision is becoming increasingly challenging due to Even The UNICEF, and other humanitarian agencies, have been looted by armed individuals in Khartoum and across Darfur states and serious security threats have hampered UNCEF's capacity to provide critical humanitarian assistance in the conflict affected areas.

Humanitarian Needs and UNICEF Response

UNICEF's response will 1) initially focus on providing urgent assistance to the newly displaced in the five states where there is no ongoing conflict and where there are the largest gathering points: in White Nile, Blue Nile, Gadaref, Kassala, and Red Sea; 2) maintain some critical and life-saving basic services in Khartoum and the Darfurs, through local partners and staff on the ground, but to do this, we need the ceasefire to hold to have access to the affected children and families.

While the situation is rapidly evolving, UNICEF's response strategy will focus on several key areas, including:

- Deliver life-saving humanitarian assistance, including:
  - Provision of health supplies to facilities for the treatment of injured persons.
  - Sustaining critical services, such as healthcare and vaccination, treatment of children with Severe Acute Malnutrition (SAM).
  - Providing safe and equitable access to WASH services.

- Engaging in high-level advocacy for continuous humanitarian access, which is currently restricted, and the protection of children's rights. Advocacy for children's rights, Monitoring and Reporting on Grave Violations of Child Rights (MRM).

- Sustaining services in both conflict and non-conflict areas, given that Sudan had 15.8 million people in need of humanitarian assistance prior to the recent conflict. Delivery is becoming increasingly difficult due to various challenges including insecurity, Khartoum is being jeopardized and delivery of supplies is hampered, intermittent electricity supply and banking system operation. This is particularly critical for sectors where UNICEF is responsible for the pipeline for the country (supplies for SAM treatment, vaccines) and to some extend in WASH.

- Our existing cash programming for pregnant/lactating women and their children in Eastern Sudan is being reviewed for continuation and potentially expanded to support incoming IDPs to the East and North, if conditions allow.

- Close coordination with UN Agencies, I/NGOs, and partners to optimize understanding of operational footprint and capacity on the ground, information sharing and efficient and effective collaborations.

[2] Public schools have opened in 12 states: Blue Nile, Central Darfur, East Darfur, Gedaref, North Darfur, North Kordofan, Northern, Red Sea, River Nile, Sennar, South Kordofan, White Nile.

- Mapping of access, securing alternative logistical routes and partners with the aim responding to new humanitarian needs.

Health

Needs: Response to mass trauma/casualties and additional humanitarian caseload; support FMOH (Federal Ministry of Health) to secure vital vaccines and critical medicines from being destroyed due to violence and lack of power supply and sustaining health services.

Response:

- UNICEF has provided emergency health kits, essential supplies and medicines to hospitals and primary healthcare centres to support the treatment of the injured and access to life-saving health services in Khartoum and El Fasher.
- UNICEF securing 5,000 litters of fuel for Central Cold Chain to safeguard millions of doses of vaccines and additional 5,000 litters for cold chain insulin for children, and is engaging in high-level advocacy. Support to Public Health Centers (PHCs) in affected areas with supplies and equipment.
- UNICEF is working closely with F/SMoH to delivering vaccines to the states that face stock out of critical children's vaccines.

Gaps and constraints: Many hospitals and pharmacies are closed, limiting access to lifesaving care and commodities. Dispatch of quarterly vaccine and other health supplies is being affected and some supplies are looted/destroyed; vaccine stock is reaching an alarming status and states likely to report stock outs within one week. Targeting and looting of personnel, premises, and assets, including ambulances and SRCS (Sudanese Red Crescent Society), poses significant risk for humanitarian health actors.

Nutrition

Needs: Sustaining existing interventions, especially prioritizing treatment of children with Severe Acute Malnutrition (SAM) and Pregnant Lactating Women (PLW), prioritizing interventions to sustain Stabilization Centers for children with SAM complications, followed by treatment for SAM children without complications, where/when possible. The caseload of malnutrition could start rising in the coming months due to displacement and shortage of food. While sufficient nutrition supplies to last till end of June have already been prepositioned in the field locations, replenishment will be needed due to widely reported looting across several states.

Response:

- Assessing existing capacity of partners, taking into account that almost all partners are facing security issues, looting of assets and supplies.
- Assessing the situation of prepositioned supplies and determine the need for replacements due to looting.
- Estimate the potential increase in caseload.
- Continuation and strengthen the existed health and nutrition services in Kassala, Red Sea and Gadref states by ensuring availability of supplies and adequate staffing. At the moment there is no shortage of vaccines and nutrition supplies for management of SAM.

Additional RUTF and therapeutic milk have been dispatched to the stabilization center of Port Sudan pediatric Hospital.
- In El Fashir, UNICEF supported reactivation of Abu shock Stabilization Center and total of 3,436 new admissions of SAM children have been reported in 214 OTPs across North Darfur state.

Gaps and constraints: Disruption of supply pipeline for both offshore pipelines and local production, which relies heavily on imported ingredients.

Water, Sanitation and Hygiene (WASH)

Needs: Safe and equitable access to water remains one of the main challenges in Khartoum and other affected states. In Khartoum several neighborhoods face severe shortage of water due to power outage, lack of fuel and damage to some of the water supplies. Access to water supplies in El Fasher was interrupted due to an electrical outage. Limited access to water supplies in the prolonged Internally Displaced Persons camps was also reported due to the lack of fuel. In Eltahir, the water quality treatment unit and drilling rig and other equipment have been destroyed. Lack of safe and equitable access to water increases risks of gender-based violence for women and girls.

Response
- UNICEF provided water treatment chemicals, water tanks and collapsible containers to the State Ministry of Health in Khartoum to sustain WASH services in six hospitals.
- With UNICEF's support, WES (Water and Environmental Sanitation) in North Darfur provided safe water to El Fashir hospital through water trucking.
- In East Darfur state, 1,000 individuals were provided access to safe water, 500 individuals gained access to basic and improved sanitation facilities, and 1,100 people were reached with key positive hygiene messages (450 women) including (380 men) 270 children in East Darfur State.
- Rapid assessment was conducted in 8 gathering points in Port Sudan and sanitary WASH supplies were distributed targeting.

Gaps and constraints: The normal operation of some of the water supplies in Khartoum town has been disrupted by the ongoing conflict. Access to water supplies remains one of the challenges for SWC staff. Securing safe routes for SWC staff will help in restoring the water services.

Child Protection

Needs
- An increasing number of children and parents are expected to be in need of Mental Health and Psychosocial Support (MHPSS).
- Prevention and response to child separation from family, and promotion of family-based care in the child's best interest.
- Monitoring, analysis and reporting on Grave Violations on Child Rights (MRM) with a focus on Khartoum, North Kordofan, North Darfur.
- Prevention and response to child recruitment and use by armed actors.

- Increase risk and cases of Gender Based Violence (GBV), with very limited access to prevention and response services.
- Mine risk education is much needed because there are a lot of UXOs everywhere which can expose children to high risk of death and injuries

Response

- MRM has been activated from the onset of the crisis.
- 60 community volunteers have been deployed in Khartoum, Bahri and Omdurman to provide MHPSS.
- Partners CDF has distributed 500 Jerrycans for IDPs in the gathering points and 4 cartoons of dignity kits.
- In South Darfur, social workers from MoSA, RDO, Elgosa, and Hope organizations visited Turkey's hospital and provided Psychosocial (PSS) 146 survivors from UXO, of which 34 were children.
- In Port Sudan, UNICEF agreed with the Ministry of Health PSS focal person and the director of Port Sudan Mantel Health Hospital to support provision of PSS first aid, the identification of the main stressors, and establishing a referral mechanism for children displaced in Port Sudan. 53 PSS officers who were previously trained by UNICEF have been identified to provide the response including provision first aid PSS, individual and group sessions, as well as establishment of child friendly space within the gathering areas.

Gaps and constraints

- Prevalent security situation limits UNICEF and partners ability to respond to the emerging crisis.
- No accurate information on situation of children affected by conflict (six grave violations), displaced, injured, killed, unaccompanied and separated children.
- Children at the street are at risk of being associated with organized criminal gangs engaging in looting the market and NGOs premises.

Education

Needs

- Prevention of exploitation, abuse, and involuntary recruitment into armed groups;
- Safe and child-friendly learning spaces, especially for girls and adolescent girls, prioritizing their well-being and safety.
- Provision of Education in Emergency supplies (prepositioned) to mitigate the adverse effects of school closures, in schools and safe learning spaces.
- Psychosocial support to children through counseling and other interventions, equipping them with essential skills to cope with trauma at schools and alternative safe learning spaces.
- Support adolescents and young people in participating in or leading engagement initiatives.

Response

- Mapping and assessment of the impact of the conflict on schools and learning institutions.
- Planned support to school final exams.
- Ongoing support to schools that are operational.

Gaps and constraints: The prevalent security situation and breach of humanitarian principles hinder humanitarian interventions and the sustainability of critical programmes by UNICEF and partners, with very limited expectations.

Social Inclusion and Cash Assistance

Needs: Sustaining existing programme of Mother and Child Cash Transfer Plus (MCCT+) and potential cash response for newly displaced populations.

Response: Assess risk and feasibility of cash programming under the current situation.

Gaps and constraints: A thorough assessment of risks as well as mitigations will be required to undertake cash programming under the current conflict situation.

Supply and Logistics

UNICEF warehouses across Sudan had sufficient supplies prepositioned for an initial response in Khartoum, including medical, WASH and nutrition supplies. Several supplies are also stored in government counterpart warehouses. However, some supplies have been looted, and at the moment, the security situation, shortage of fuel, targeting of large vehicles/trucks allows only very limited dispatch and access to the UNICEF warehouses across the country.

UNICEF have been able to release a small quantity of health kits and RUTF worth approx. $13,000 and are planning the distribution of additional health and WASH supplies once the situation allows. A supply plan has been developed for critical supplies, adding to what is already in country, and orders are being processed accordingly for shipment.

Access to and within the country remains a challenge. Replenishing of supplies in some field locations is challenging. With the main international airport in Khartoum shut down, all air shipments have been diverted, most critically for vaccines. Some supplies are stranded at transit points. For now sea shipments continue to Port Sudan however the situation remains volatile, and UNICEF is exploring alternative entry points.

Ongoing construction projects are being monitored to ensure that quality standards are maintained. Some projects require mandatory periodic inspection and approval by UNICEF engineers. These may be delayed until access to these sites by UNICEF is possible.

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Humanitarian Leadership, Coordination and Strategy

UNICEF leads Nutrition and WASH Sectors co-leads the Child Protection AoR, and Education Sector. Inter-Sector Working Group (ISWG) is led by OCHA, with regular coordination in place. UNICEF is a key partner in the in-country interagency PSEA Task Force, Access Working Group and Refugee Coordination Forum.

Child Protection Area of Responsibility (CP AoR) conducted mapping of operational partners on the ground. 20 humanitarian partners are currently active in Kordafans, Darfur and White Nile states. CP AoR disseminated Mine Risk Education materials including audio messages and prevention messages on “how to protect children during conflict” preventing family separation.
CP AoR co-lead State Council Child Welfare (SCCW) together with UNICEF in South, West and North Kordafan states are mobilizing sector partners to undertake situation monitoring on the Child Protection risks and need in the states. In North Kordofan State, community-based child protection (CPCBNs) volunteers continue to monitor and report daily on the situation of children in the state.

Nutrition services were suspended in Khartoum, West Darfur and in several localities in other states and sites, posing significant risk for children in the country with 3 million under-five children severely malnourished. Most of the partners' response capacity exist to continue with the services. Nutrition sector drafted key messages on the impact of conflict on nutrition situation and response on under-fives and pregnant lactating women (PLWs) to advocate for critical needs. The sector also analyzed the nutrition situation, response needs, including functionality and supply status, top priority needs. Initial rapid response and capacity assessment of nutrition sector NGOs partners have been conducted.

Functionality of life saving services (SCs, OTP and TSFP) has been mapped in consultation with WFP, UNICEF and WHO. As of 2nd May about 65% of 157 SCs, 84% of the 1924 OTP and 31 of 1482 TSFP sites across the country were operational. These figures will be further updated based on inputs from NGO partners that have reported interruption of nutrition services in Central Darfur, parts of South Darfur, parts of Blue Nile and South Kordofan. Interactive Map on functionality of services has been prepared.

A national level Nutrition sector coordination meeting was held on 2nd May, during which partners expressed commitment to continue responding, prioritizing sustaining the existing services and initiating response in IDPs. Partners agreed on the following priorities access, sustaining the ongoing lifesaving services, resumption of nutrition services where security allows, ensuring availability of supplies, additional funding to cope with the increase operational costs, revising response strategies and response modalities, adjusting funding and operations, given limited banking services/cash to support services. Nutrition sector meeting to be held weekly instead of monthly. Coordination meeting at subnational level continuing in Kassala and red Sea, interrupted in other states. Sector IMO support requested from GNC and assigned since 25th April.

Nutrition sector Crisis response plan has been drafted- to be reviewed by the SAG and partners next week. Sector discussed with WFP, UNICEF and WHO on the need to revise the acute malnutrition People in Need (PIN), estimating children that missed services and revising the units cost for the flagship programs.

In several states a number of partners reported looting of WASH supplies and assets especially in Darfur. The WASH sector is looking for a window to replenish the looted supplies and reach out to the affected areas in the country. Currently, there is ongoing mapping exercise of the partners and analyzing the situation on the logistical front along with the logistic cluster. The priority for now is to provide water and hygiene supplies to the health facilities. With support from WES, UNICEF has been reaching out to the health facilities by delivering water by truck for the last ten days, with the only truck previously provided by UNICEF. In addition, in the past few days, quantities of soap and hygiene items were distributed to (14) healthcare facilities serving about 10,000 people. Operations continue in South Kordofan and West Kordofan. Caution in North Kordofan.

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