SUDAN

Highlights

- The conflict in Sudan is a deepening children’s crisis. Critical needs are rapidly multiplying – 1 in every 2 children or 13.6 million children in Sudan are in need of urgent humanitarian assistance.

- Since the conflict between Sudanese Armed Forces (SAF) and Rapid Response Forces (RSF) erupted on 15 April, over 2.9 million people have been displaced across Sudan and into neighboring countries – the Central African Republic, Chad, Egypt, Ethiopia, Libya and South Sudan, including around 1.5 million children.

- The humanitarian situation continues to deteriorate, with the most severe clashes continuing in Khartoum and Geneina in West Darfur, and clashes between Sudan People’s Liberation Movement – North (SPLM-N) Al Hilu faction and SAF reported in South Kordofan and Blue Nile states.

- The situation in conflict zones and in some IDP concentration points remains dire. With active fighting and looting in conflict areas, basic services including immunization services and cold chains are not fully functional, leaving children at significant risk of disease. Outbreaks of measles, increase in mortality rates associated with acute malnutrition, overcrowding and insufficient access to basic services have been reported in Darfur and White Nile.

- Since the start of the conflict, UNICEF Sudan has reached over 3 million children and women with health supplies and 1.4 million people with safe drinking water. Additionally, almost 100,000 children are attending safe and equitable /gender-responsive learning spaces, including solar-powered e-learning centres.

- To continue to save lives, UNICEF needs US$838 million in 2023 to provide lifesaving assistance, with US$100 million urgently needed in July - August to sustain and scale-up crisis response.

Key figures

- **24.7 million** People in need
- **11.9 million** People to be reached
- **13.6 million** Children in need
- **9.4 million** Children to be reached

Funded 6%

UNICEF Sudan
HAC 2023
US$838 million

Funding gap 94%
Funding overview and partnerships
Without an immediate and extensive crisis response, the consequences of displacement, lack of basic social services, and protection will have devastating - and long-term - effects on children, and on the future of Sudan.

UNICEF Sudan needs US$838 million in 2023 to provide lifesaving assistance, as per the revised Humanitarian Action for Children (HAC) 2023, which is only six per cent funded.

UNICEF Sudan is urgently appealing for US$100 million to sustain and scale-up our crisis response to reach 4 million children and families with lifesaving nutrition (US$38 million), health (US$27.5 million), WASH (US$20.5 million), child protection and education (US$14 million) services. Funding, especially flexible in nature, is needed to restock supplies, and support partners, including local women’s organisations, to deliver essential services in hotspot areas, especially in Khartoum, the Darfurs and areas of large displacements.

UNICEF Sudan would like to sincerely thank the donors supporting the humanitarian response in Sudan: Canada, the United Kingdom, Norway, Kuwait, Japan, France, as well as Gavi, the Vaccine Alliance, Education Cannot Wait (ECW), Central Emergency Response Funds (CERF), and UNICEF National Committees.

As we approach the 100-day mark since the onset of the conflict, we continue to count on our partners to:
• Strongly advocate for the rights of children caught in the middle of this devastating crisis in Sudan.
• Strongly advocate for unimpeded access and free movement and protection of humanitarian goods and staff.
• Flexible funding to sustain and scale-up support for children, their families and communities in Sudan.
• Allow for flexibility in managing committed and additional funding to sustain essential social services for vulnerable children and families across Sudan.

Situation overview – a deepening children’s crisis
The conflict continues to rage across many parts of the country, with intense clashes continuing in Khartoum and Darfur, and clashes between SPLM-N Al Hilu faction and SAF reported in South Kordofan and Blue Nile states. More active conflict and disruption of lifesaving services will only push children and other vulnerable groups deeper into desperation, severely challenging their right to survive and thrive.

The conflict has taken on an ethnic dimension in Darfur, where the situation remains gravely alarming, putting 5 million children at risk of increased deprivation and protection.

The fighting in Sudan has already led to the displacement of over 2.9 million people across Sudan and into neighboring countries – the Central African Republic, Chad, Egypt, Ethiopia, Libya and South Sudan, including around 1.5 million children.

The highest proportions of the internally displaced people (IDPs) have been observed in River Nile (16.4 per cent), Northern (15.8 per cent), White Nile (11.4 per cent) and West Darfur (11.1 per cent) states. Most IDPs are staying with relatives in host communities. People were originally displaced from seven states, with the majority coming from Khartoum (1.5 million), followed by West Darfur (256,000). Renewed clashes in South Darfur, North Darfur and West Darfur from 18 to 24 June have contributed to the increase in the number of people displaced. Overall,
about 670,000 people have been newly internally displaced in the Darfur region since the onset of the clashes in April, including many people who had already been internally displaced due to previous conflicts in Darfur.¹

According to the Federal Ministry of Health (FMoH), over 1,100 people have been killed and close to 12,000 injured across the country since the beginning of hostilities on 15 April.² UNICEF has received credible reports that over 330 children have been killed, and more than 1,900 children have been injured.

Even before the conflict, more than 3 million women and girls in Sudan were at risk of gender-based violence, including intimate-partner violence. This number has since climbed to an estimated 4.2 million people. Since this conflict began, the UN Human Rights Office in Sudan has received credible reports of 21 incidents of conflict-related sexual violence against at least 57 women and girls. The survivors include at least 10 girls. The actual numbers are estimated to be much higher. Top UN Officials, including UNICEF, have sounded the alarm at the spike in violence against women and girls.

The operating environment in Sudan has become highly complex. Humanitarian access to the affected populations due to insecurity and limited capacity on the ground remains a key challenge in scaling-up the life-saving emergency response. In addition:

- The functioning of public infrastructure and services continues to be affected due to the ongoing fighting, looting and restriction of movement of personnel and supplies due to safety and security.
- The majority of civil servants have not received their salaries since the start of the conflict and any payments to frontline workers are constrained by cash shortages. Over the past two weeks network has improved. The use of mobile banking applications, particularly “Bankak” by the Bank of Khartoum, which has national coverage, has expanded the cashless payment options, including for the purchase of cash at a premium price.
- Very limited or no electricity, communication disruption and a spike in fuel and essential commodities prices further threaten the operational capacity of water systems and health facilities, including cold chains.
- Funding availability is curtailing UNICEF’s capacity to deliver critical supplies and support services.

Humanitarian needs

Humanitarian needs are rapidly multiplying – one in every two children or 13.6 million children in Sudan are in need of urgent humanitarian assistance, and 1.5 million children have already been displaced across Sudan and into neighboring countries. Anticipated food shortages, combined with epidemics including measles, interrupted health services, access to safe water, and one of the highest malnutrition rates in the world, will have significant implications on the health and nutrition status of children. If this conflict is not immediately halted, up to 650,000 severely acute malnourished children will not receive life-saving treatment, 1.7 million children under-one risk missing critical vaccinations, millions of children will miss out on learning opportunities, and millions of boys and girls will lack a sense of safety and psycho-social well-being. The future of children in Sudan is at stake.

The situation in conflict zones and some IDP concentration points remains dire. With active fighting and looting in conflict areas, basic services including immunization services and cold chains are not fully functional, leaving children at significant risk of disease. Outbreaks of measles and an increase in mortality associated with acute malnutrition and the compounded effect of overcrowding and insufficient access to services have been reported in Darfur and White Nile states.

According to FEWS NET³ staple grain prices are expected to escalate 200-700 per cent above the five-year average over the coming year, especially in light of the depleting stock in local markets outside Khartoum during the lean season. This is aggravated by the logistical cutting off of Khartoum with its important role in trade flows of imported and exported goods, not to mention the associated trade interruptions in Port Sudan. With the on-going conflict and limited supply inputs for the current agricultural season, many areas are likely to miss the next planting season. FEWS NET forecasts a rapid increase in the number people facing Crisis (IPC Phase 3) and Emergency (IPC Phase 4) levels of food insecurity especially in Darfur and Kordofan by August/September.⁴

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¹ IOM’s DTM and UNHCR as of 4 July
² Federal Ministry of Health Report, as of 30 June 2023.
³ Famine Early Warning Systems Network.
Given the pre-existing and new humanitarian needs, UNICEF Sudan is staying and delivering for the children and vulnerable people, including female-headed households, following a 3-prong strategy.

1. **HOTSPOTS** (9 states: Khartoum, Darfur and Kordofan): Delivering critical and life-saving basic services, through local partners and staff on the ground.

2. **DISPLACEMENT**: (7 states: Gezira, Kassala, Red Sea, Gedaref, White Nile, River Nile, Northern State): Delivering urgent assistance to the newly displaced where there is no ongoing conflict and with the largest gathering points.

3. **PRESEVING BASIC SERVICES**: Treatment of children with SAM, delivery of primary healthcare, vaccinations, WASH, CPIE and EIE and cash plus interventions.

UNICEF implements health and nutrition, water and sanitation, and education and child protection activities through partnerships with 64 implementing partners in Sudan, of whom 43 are currently operational, including 21 civil society partners, including women-led organizations. Overall, 23 per cent of partners are governmental entities and 77 per cent civil society organizations, operating in 17 out of the 18 states and cover 105 localities of Sudan. UNICEF continues to harness its partnerships with the local private sector in support of humanitarian operations, where possible.

**UNICEF programme response**

In view of the deteriorating humanitarian situation and the urgency and scale of needs, and considering the complexity of the crisis, UNICEF has activated its Level 3 corporate emergency procedures for six months until December 2023 to ensure a timely and effective response to crises.

**DARFUR**

Efforts continue to reach hotspot areas to deliver critical supplies and provide assistance and access to basic services.

- Given the situation in Darfur and lack of access, UNICEF Sudan deployed a small team to Chad to coordinate with UNICEF Chad and lead UNICEF cross-border operation and in response to the IDP needs in Darfur. The efforts are coordinated with other agencies, including securing assurance from the parties concerned in Chad.

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5 UNICEF’s response is guidanced by gender analysis and gender responsive implementation via these partnerships.
and Sudan. The team has already met partners and stakeholders from Geneina (capital city of West Darfur), and are exploring the transfer of remaining supply stocks in Geneina through INGO/NNGO partners.

- UNICEF Sudan has established a team in Farchana for delivering additional supplies initially to West Darfur. 60 metric tons of life-saving health, nutrition and WASH supplies for cross-border support are expected to arrive in Chad next week for planned onwards distribution into Sudan in support of providing lifesaving services where they are needed most.
- Given the current lull in fighting in Geneina and a local agreement from the new Wali for humanitarian action, UNICEF Sudan is partnering with key national and international NGOs, as well as the Sudan Red Crescent, to release supplies already pre-positioned in Geneina. These supplies will be distributed to 12 health centres and will be used to treat child illness and manage malnutrition. Once written assurances are received from the federal authorities of Sudan, UNICEF is ready – in coordination with its partners – to cross from Chad into Sudan with additional supplies and support.
- UNICEF Sudan transported some health and nutrition supplies from North Darfur to Central Darfur, where even functional services are at risk of supply stock out.
- Arrangements have been made to move six trucks, 50 metric tons each, of Ready-to-Use Therapeutic Food (RUTF) to Kosti, White Nile to join an interagency supply convoy from Kosti to North and South Darfur.
- UNICEF continues to expand its partnership with actors who remain operational in hotspots, especially in Darfur and Khartoum, delivering critical supplies and life-saving support.

**Health**

An estimated 60 per cent of hospitals in hotspots or areas with active conflict are non-functional due to looting and destruction of equipment and supplies. The operating environment in Khartoum and parts of Darfur remains severely hampered, with reportedly uncollected bodies still on the streets in Geniena, West Darfur raising the risk of disease outbreaks. Despite the challenges, health facilities in Kulbus, Jebel Moon, Morni and Forbranga hospitals are functioning. However, severe shortages of supplies or imminent stock-out is increasingly being reported. Immunization services continue in Habila, Forbaranga, Jebel Moon and Kulbus localities. Similarly, in Central Darfur most primary health care facilities remain functional but are running out of supplies. Finding ways to replenish supplies is one of the top priorities for UNICEF.

In East and South Darfur, over 1,000 people have received medical consultations through a mobile health clinic at the transit/entry point of new IDPs in Minal Al Bari area in El Daien locality and at Nyala Teaching Hospital. In addition, 390 children and women have received primary health care services.

In Gezira, 35,600 children and women have obtained access to primary healthcare in UNICEF-supported health facilities at IDP gathering points and in hosting communities.

**Immunization:** Measles outbreaks are flaring up in 28 localities in 11 states. To date, over 900 cases have been reported from Gadaref, Gezira, Khartoum, Central and North Darfur, and North, West and South Kordofan, as well as River Nile.

The state and area Rapid Response Teams (RRT) have been investigating the suspected cases of measles, especially among displaced populations and/or children, and responding accordingly. These teams have reported overcrowding in some camps, which may exacerbate disease outbreaks. Access remains a challenge for RRTs due to the risk of looting along the routes when travelling to different localities.

UNICEF continues to support the continuity and strengthening of routine vaccination along with social behaviour change interventions. As a result over 2,600 children have been vaccinated against measles during the reporting period (12–30 June). Routine vaccines that have been distributed to the states are sufficient only until the end of July 2023. Active support, including for immunization and treatment, is also being provided to curb the measles outbreak flaring up in 11 states. UNICEF urgently requires US$3.5 million (including US$1.6 million for vaccines only) to procure 2.5 million doses of measles vaccines and to facilitate campaigns to maintain child immunity through the provision of routine immunization services, and 1 million doses required to respond to small scale outbreaks in states where there is no active fighting.
Nutrition
UNICEF continues to assess the functionality of outpatient therapeutic programme (OTP) centers and the availability of supplies throughout the country to ensure the provision of critical and lifesaving services for children with severe acute malnutrition (SAM). Access issues are posing challenges to replenish supplies, including ready-to-use therapeutic food (RUTF), which is affecting a number of functional OTP sites. An estimated 76 per cent of the OTPs are functional across Sudan, with Darfur, Khartoum and Kordofan having fewer OTP sites that are functional. So far, 1.7 million children under-five have been screened for malnutrition, including in Darfur, with around 82,300 children with SAM admitted for treatment. Low reporting rates continue to be a challenge, with only 43 per cent of facilities reporting in May.

UNICEF and partners continue to provide lifesaving nutrition services in hotspot states and areas with high concentrations of IDPs, where the nutrition situation is deteriorating. A recent screening conducted by Sudan Red Crescent Society (SRCS) reported high levels of proxy GAM of 22.5 per cent, while SAM prevalence was 4.9 per cent. High levels of acute malnutrition were reported in the IDP areas in Atbara, and a preliminary SMART survey report from one locality in North Darfur indicates a very high prevalence of acute malnutrition just before the conflict started. Reports of increased mortality associated with malnutrition are being received from some refugee camps, especially in White Nile. UNICEF is engaging with partners for scale up of the response in the state. More resources for program operation are required to allow scale up in states where the mainstay of service delivery used to be the public health facilities that are now getting overwhelmed due to the impact of the conflict including the IDP influx.

UNICEF and its partners scaled up the provision of nutrition curative interventions in Gezira by establishing 24 new OTP sites to expand geographical coverage and ensure access to and utilization of lifesaving treatment services, including five of these sites providing screening and treatment services to displaced populations in gathering points. In River Nile, UNICEF supported the establishment of five mobile health and nutrition teams to provide services to vulnerable communities in hard-to-reach and remote areas.

UNICEF continued to support the distribution of RUTF across the country, including in hotspots. A total of 3,470 metric tons of RUTF has been distributed in Sudan since the beginning of the year. These supplies will cover the need for managing 250,000 children under-five with severe acute malnutrition. Of these, 43,000 cartons have been delivered since the beginning of the conflict. UNICEF managed to deliver 1,000 cartons of RUTF and routine medication to Central Darfur for the first time since the start of the conflict. The supplies were delivered to the most remote areas of Rokero, North Jabal Mara locality, which will enable the treatment of 1,000 children under-five with SAM in 21 OTP sites.

Water, Sanitation and Hygiene (WASH)
UNICEF continued to deliver critical life-saving WASH services to vulnerable IDPs and at-risk communities in 13 of the country’s worst affected states to mitigate the impact of low availability of existing and/or functional WASH infrastructure and supplies.

Highlights of UNICEF’s WASH response during this reporting period have been:
• The establishment of 10 water committees across gathering points in Red Sea state, enabling communities to operate, maintain and manage these water points with minimal reliance on external sources.
• UNICEF is safeguarding drinking water supply in Khartoum by facilitating the clearance and transportation of a water treatment chemical (polymer) from Port Sudan to Khartoum, to be distributed across different water stations within the next week. This supply is vital in Khartoum and other major cities like Atbara, Damazine, Kosti and Madani to treat the turbid water from the Nile River during this peak rainy season, since maintaining the pipeline under the current fluid situation is a critical aspect of effective water supply delivery.

During the last two weeks, an additional 650,000 people (including 357,500 children) gained access to safe water for drinking and domestic needs, representing a 36 per cent increase from the last report, bringing the total number of beneficiaries reached by UNICEF since the start of the conflict to 1.4 million (and 1.8 million since January 2023). Overall, 631,000 individuals benefitted from UNICEF’s assistance in trucking drinking water (in Gezira, Red Sea and River Nile), and its contribution to the operation and maintenance of critical water supply systems, including

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Where possible, UNICEF aims to reach 50 per cent gender parity in the committees.
water chlorination, fuel, spare parts, and coverage of staff-related costs (in North, East and West Darfur, White Nile, Red Sea, Kassala, Red Sea, Gedaref and Gezira); while 19,000 people benefitted from new and rehabilitated water supply points (in East, West and Central Darfur, North Kordofan and Sennar).

UNICEF also ensured that around 14,500 people (including 7,975 children) gained access to appropriate sanitation services (in North Darfur, East Darfur, and Gezira), bringing the total number of beneficiaries reached since the start of the conflict to 34,200 (and over 48,700 since January 2023).

A major accomplishment has been UNICEF’s contribution to maintaining a dignified and clean environment at IDP gathering points. In Gezira, for example, this was achieved by desludging 264,000 liters of liquid waste from 86 communal latrines across three IDP gathering points. In North Darfur, UNICEF also supported the construction of seven communal emergency latrines in one school, currently sheltering IDPs.

Around 43,000 people (including 23,650 children) were reached with hygiene promotion messages in East, North and South Darfur, White Nile, Sennar, Gezira and River Nile, bringing the total number of beneficiaries reached since the start of the conflict to 402,000 (and over 823,000 since January 2023). By engaging individuals in hygiene promotion activities, and disseminating guidance around water treatment methods, latrine usage and best practices for solid waste disposal, newly arrived IDPs, refugees and host communities were equipped with knowledge to better prevent the spread of disease. UNICEF also worked with communities to ensure a clean environment, by supporting cleaning and garbage collection for seven gathering points in River Nile.

UNICEF contributed to maintaining infection, prevention, and control measures at health facilities, by continuing to support the operationality of basic WASH service levels. During this reporting period, UNICEF supported eight health facilities in North Darfur (seven with ongoing water trucking, including one provided with supplies that enhanced water storage as well; and one with cleaning materials).

Distribution of critical WASH supplies (mainly hygiene kits, jerry cans/water containers, and soap for handwashing) continued across the country. During this reporting period, UNICEF’s supplies were distributed in South and North Darfur, Red Sea, White Nile, Gezira, and River Nile.

Ahead of the rainy season, UNICEF also begun pre-positioning supplies in Kassala, a major hub for its response to IDPs. An additional 2,600 individuals benefitted from UNICEF’s WASH supplies’ distribution (including 1,430 children), bringing the total number of people reached since the 15 April to 20,800 (and over 113,500 since January 2023).

Partnerships remained critical to UNICEF’s ongoing ability to successfully deliver its WASH response. UNICEF relied on its collaboration with the Water and Environmental Sanitation Department (WES), the State Ministry of Health as well as direct engagement with the NGO community, retaining partnerships with eleven WASH partners.

Child Protection

UNICEF and its partners provided psychosocial support to around 41,900 children and their parents in Sudan. 324 unaccompanied and separated children were given alternative care or reunified with their families, and 12,308 community members, including children, were provided with messages/training on landmine and other explosive weapons prevention and the dangers of unexploded ordnance and/or remnants of war. Most community structures, including the child clubs and community-based child protection networks, were activated to facilitate emergency response and denounce and report violence against children. Over 37,060 women, girls and boys received access to gender-based violence risk mitigation, prevention and/or response interventions and 1,152 women girls and boys with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations. UNICEF continued to facilitate the referral of children affected by armed conflict (CAAC) and their families to basic social services.

The Monitoring and Reporting Mechanism (MRM) on grave child rights violations has been activated from the onset of the crisis but faces some challenges in verifying the incidents due to insecurity and access obstacles. The trained community-based child protection network members actively monitor and report violence against children. UNICEF, in coordination with the State Councils for Child Welfare (SCCW) and the MRM working group, is focusing on ensuring all reported MRM cases are verified across the country.
UNICEF continued to support and follow up on 297 children without parental care, who were evacuated from Mygoma orphanage in Khartoum: 18 children, including 14 girls, aged 7 months–3 years, have been placed with foster families (Kafala) with the support of UNICEF and in collaboration with SMoSD; Seven children to be placed with foster families after the Eid Al-Adha holidays; 25 families in Red Sea (Kafala) have been assessed and are ready to travel to pick up the children from Madani after Eid Al-Adha holidays; 50 families in Gazira showed interest to be foster families (Kafala). Moreover, UNICEF signed an agreement with Top Care Company as a supplier to provide food and non-food items to the Orphanage Transition Care Center. The supplier has already started supplying the food items since 18 June. A partner has been identified for the provision of Emergency Protection and Care of Children without Parental Care.

Education
Since the start of the conflict, UNICEF has established a total of 412 child-friendly, safe and gender-responsive learning spaces, benefitting more than 24,000 crisis-affected girls and boys. These learning spaces have a primary focus of addressing the children's psychosocial wellbeing and ensuring their protection from exploitation and involuntary recruitment into armed groups.

During the reporting period, UNICEF created 11 safe learning spaces and distributed learning and recreational materials to around 3,600 internally displaced girls and boys. Moreover, 66 facilitators were trained by UNICEF in providing psychosocial support and to effectively support the healing process of crisis-affected children. As part of ongoing efforts, UNICEF continued to support 15 adolescent-led child clubs within these learning spaces. A total of 107 adolescent girls and 111 boys actively participated in sports clubs, cultural clubs, and health clubs, further enhancing their overall wellbeing and development.

Additionally, in Sudan and neighboring host countries, approximately 22,330 recently displaced children, youth, and teachers are benefitting from the Learning Passport programme, developed by UNICEF. This digital initiative offers uninterrupted access to high-quality education, aligned with national curricula, enabling educational progress and the continuity of learning for children affected by crises and displacement.

All of these efforts prioritize the well-being of children by providing structured learning opportunities, psychosocial support, and essential resources. The aim is to promote children’s resilience and foster their developmental growth, even in the midst of a crisis.

Social Inclusion and Cash Assistance
UNICEF continues to implement the Mother and Child Cash Transfer Plus (MCCT+) for the First 1,000 Days of Life programme in nine localities in Kassala and Red Sea, currently hosting about 52,000 people displaced from Khartoum and other conflict areas. The most recent payment cycle reached more than 50,000 pregnant and lactating mothers who received cash payments along with antenatal and postnatal care and social and behaviour change on essential family practices. The next payment cycle (sixth) is planned in the coming weeks and refresher training of frontline workers including midwives and social workers started this week.

In the meantime, UNICEF is taking several initiatives to expand the MCCT+ and other cash response and support interventions to more women, including those that are newly displaced by the current crisis. In preparation of the next payment cycle, UNICEF has conducted a risk and feasibility assessment to identify different cash payment modalities and assess market functionality in priority areas and is mapping out additional local partners to support cash interventions. UNICEF continues to actively engage with the Cash Working Group to coordinate across partners and engage in joint assessments.

Cross-cutting areas
Social and Behaviour Change (SBC)
During the reporting period, social and behaviour change interventions continue to focus on collecting social and behavioral insights, developing and disseminating life-saving messages, and engaging communities in designing and delivering the response. Key themes emerging from social and behavioral insights include feedback on health

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7 IOM Displacement Tracking Matrix 13 June 2023
(ongoing measles outbreak, water-borne diseases expected during the rainy season including cases of diarrheal disease) and WASH services (lack of treated water, lack of functioning latrines in gathering points), sexual and gender-based violence (significant increase in reports), and armed conflict (crisis and conflict between host communities and IDPs). In response, SBC interventions, in coordination with FMoH Expanded Programme on Immunization (EPI) and Health Promotion departments in five states, focused on health and sexual and gender-based violence training for gathering point committee members, as well as community dialogue sessions on vaccination and management of measles and diarrheal diseases.

In partnership with State Ministry of Health (SMoH) in Gezira, Kassala, Sennar, River Nile and White Nile, close to 28,000 people in gathering points and host communities participated in SBC activities – community dialogues, capacity-building, survey administration, and design and testing of life-saving messages.

Specific efforts for life-saving messages in the reporting period included design, testing and distribution of four posters on first aid during conflict, as well as the design of nine posters on breastfeeding, vaccination, and diarrhea. All life-saving message efforts aim to integrate the eight essential family practices, social cohesion and self-prevention during shooting.

**Accountability to Affected Populations (AAP)**
UNICEF aims to safeguard accessible and dignified two way communication with the affected population. Three complaints and feedback mechanism channels were created (toll-free hotline/helpline, WhatsApp Chatbot and automated email) with a well-coordinated communication strategy. Additional channels for wider outreach and inclusiveness are being considered, such as community help desks and face-to-face community-feedback mechanisms (CFM) in UNICEF-supported sites like safe spaces and distribution sites, as well as empowering and capacitating community networks. In addition, cross-border information and counseling lines in Sudan are being integrated in close coordination with neighbouring UNICEF offices to ensure proper information sharing and awareness-raising for the affected population. An InForm platform is currently being installed to support AAP data gathering, analysis and reporting through multiple complaints and feedback channels.

The planning for the interagency AAP community consultation has been kicked off with interested actors to assess, listen, consult, empower and support participation of the affected population in the response design and to reflect their needs into the programmes. An interagency complaints and feedback mechanism sub-working group has been initiated between CFM partners to equip the teams with available resources like counseling lines, service mapping, collective and individual referrals, and coordination at all working group and clusters levels.

**Prevention of Sexual Exploitation and Abuse (PSEA)**
Sexual exploitation and abuse risk assurance has been done for four new national implementing partners (UMROD, SUDO, AAO, and Youth Mechanisms). A prevention of sexual exploitation and abuse training plan was developed for the national partners, relevant officials of the line ministries, UNICEF staff/affiliated staff, new responders/volunteers, and affected communities in Gezira, and is being implemented in targeted communities. A PSEA refreshers session was provided to UNICEF staff in Madani. The PSEA session was accompanied by the dissemination of the PSEA IEC materials including PSEA brochures and posters in Arabic and Sudanese languages in gathering sites in Gezira state.

**Supply and Logistics**

**Supply Plan:** UNICEF continues to face a budget gap in funding the urgent initial supply needs to support children impacted by the current conflict, their families and communities. US$70 million (US$56 million for supplies and US$14 million for shipping costs) will allow UNICEF to restock lifesaving health, nutrition, WASH, education, and child protection supplies, to sustain and scale-up its crisis response in Sudan. The supplies will be distributed directly to service providers and partners in both hotspot areas including Khartoum and Darfur, and areas of high displacement for continuation of lifesaving services.

**Local Procurement:** Efforts are underway to source from local markets following the local supply market assessment exercise. Approximately US$1.3 million worth of supplies in WASH, Education and Child Protection is being procured locally. This initiative will not only support local markets but will ensure life-saving supplies are delivered faster.
Supplies delivery to Partners: A total of 34 trucks with 1,700 metric tons of supplies were dispatched in the past two weeks, bringing the total supplies dispatched in support of essential social services to 5,300 metric tons. Six trucks, 50 metric ton each, of health, nutrition, child protection and WASH supplies worth US$1.5 million were dispatched and offloaded in Kosti, White Nile to be transported to North and South Darfur in the joint trial convoy being coordinated by UNOCHA. Education supplies worth US$350,000 were dispatched in 5 trucks, 50 metric tons each, to White Nile and dispatched from Madani warehouse to the rest of the eastern states is ongoing. 176 cartons of RUTF were dispatched from Kadugli warehouse to the State Ministry of Health. One truck, 15 metric tons, of health supplies was dispatched from El Fasher warehouse to SMOH while WASH supplies worth US$353,893 were dispatched from Madani warehouse to the WES/SWC Project in Gezira. One truck, 50 metric tons, of health, nutrition and WASH supplies for Tuti Island support was dispatched from Madani and offloaded at the MSF site in Khartoum North on 21 June. Since the start of the conflict, UNICEF delivered approximately 4,200 MT of supplies, in addition to moving 1,100MT of supplies belonging to the Khartoum Water Corporation.

Relocation of supplies from Khartoum warehouse to Madani: Stock reconciliation of the Khartoum main warehouse at Wad Madani logistics hub is ongoing and expected to be completed this week. Unfortunately approximately US$400,000 worth of supplies were lost that were being stored at a third party logistics service provider in Khartoum. This was on 29 June when the respective warehouse was destroyed by airstrikes. Reports are being finalized and will be shared with respective donor partners to account for the losses.

Supplies Received: A shipment of 15,000 dignity kits from Cairo, Egypt arrived and is in Wadi Halfa undergoing the customs clearance process. With the support of UNICEF, customs clearance of 22 containers of polymer was completed and successfully transported in 1,100 metric ton trucks from Port Sudan to Khartoum State Water Corporation.

Supplies Pipeline/Offshore Procurements. From the pipeline, supplies worth US$3.9 million are ready for shipment. A total of US$ 4.9 million worth of supplies are in transit, of which US$2 million worth of supplies already arrived at Port Sudan by sea and are undergoing customs clearance while US$2.9 million worth of supplies are expected this month and the coming month, including RUTF and medicines worth US$1.1 million from Jeddah. The sixth air charter flight with lifesaving supplies is planned for 9 July and the process of obtaining a landing permit is underway. An airlift charter to Chad with critical life-saving supplies worth US$580,000 for Darfur is also being finalized for next week.

Humanitarian Leadership, Coordination, and Strategy
UNICEF continues to lead the Education, Nutrition and WASH sectors as well as the Child Protection area of responsibility (AoR). UNICEF is a key partner in the in-country inter-agency prevention of sexual exploitation and abuse (PSEA) task force, access working group and refugee coordination forum. Interagency coordination at the accountability to the affected population (AAP) working group was resumed by two leads - UNICEF and International Aid Services – with participation of international/national NGOs and community-based organizations.

- The sectors continue to update analysis of the situation, assess capacity, including mapping of operational presence and supplies, and delivery as the situation evolves.
- The inter-sector forum is currently developing a Khartoum response strategy focusing on decentralization, integrated responses and situation monitoring. Sectors will be aligning accordingly.
- Sectors continue to closely monitor the situation on the ground, identifying gaps and prioritizing interventions in coordination with all partners. The Nutrition sector partners on the ground are reporting a deteriorating nutrition situation in some areas. Prepositioning of supplies is one of the top priorities for the sector in July to ensure the continuity of services during the rainy season.
- One of the main nutrition sector response strategies is to expand the emergency Blanket Supplementary Feeding Program (E-BSFP) to cover under-fives and Pregnant and Lactating Women (PLWs) in the hotspots as well as in IDP areas to prevent further deterioration of the nutrition situation. UNICEF is planning to scale up responses in IDP settings, while WFP will resume TSFP in 10 states in July after receiving adequate supplies particularly in the East, the Niles and the Northern States.
- Education Cannot Wait announced the allocation of US$ 5 million for the Education Sector under its First Emergency Response window, which will enable the education sector to respond to the urgent educational and psychosocial needs of children displaced to and within West Darfur and White Nile states.
The WASH sector PIN (People in Need) of 14.1 million people includes 2.2 million new IDPs, 3.8 million pre-existing IDPs (before the crisis), most vulnerable populations of the host communities and returnees. Out of which 6.1 million people were targeted as per the revised HRP (Humanitarian Response Plan). To date, WASH Sector partners have reached around 2.1 million people with basic water supply, 2.5 million with hygiene interventions, and about 250,000 with sanitation. UNICEF supported partners have also reached priority Health and Nutrition facilities, schools, and other learning spaces with WASH supplies.

38 WASH Sector partners have reported since January 2023. The funding situation as per the FTS (Financial Tracking Service) is about 14.6 per cent of the US$230.9 million. The sector coordination platform is active at the national level and connects all the state sector coordination platforms. State sector coordination platforms where active response is taking place are also active. Collaboration with UNHCR on refugee coordination continues, and UNHCR updates on refugee needs, responses, and gaps in biweekly meetings. Efforts are also made to support the gaps in the refugee locations. Some of the key partners, like UNICEF, NRC, ADRA, CARE, etc. also respond to the refugees and their needs.

Some of the main gaps and challenges include:

- Limited understanding of the operational status of services especially in Darfur, as some partners are unable to report due to security and communication cuts. This includes the status of SMOH supported nutrition sites.
- Limited funding and capacity in comparison to the scale of the emergency and competing needs is impacting all partners to deliver and scale up cross-sectoral lifesaving health, nutrition, and WASH services. Child mortality in White Nile and the recent AWD outbreak in Deling, South Kordofan are both linked with the WASH situation in the region, which alerts that if timely investments are not made to improve WASH it will further add to morbidity and mortality and thus increase the Health and Nutrition caseloads.
- Partners in Darfur and Khartoum are struggling to transport supplies and repair the damaged WASH infrastructures. Sky rocketing fuel prices have affected the functioning of water supply and cash for operations is not easy to be found.
- Challenges in reporting from the field due to insecurity and bad internet connections. Dysfunctional nutrition reporting system is limiting the understanding of the number of children, pregnant and lactating women reached with various nutrition services.

### Funding status as of 5 July 2023

<table>
<thead>
<tr>
<th>Sector</th>
<th>Original HAC 2023 Requirement (US$)</th>
<th>Revised HAC 2023 Requirement (US$)</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>32,800,000</td>
<td>67,612,858</td>
<td>7,557,020</td>
<td>60,055,838</td>
</tr>
<tr>
<td>Nutrition</td>
<td>284,400,000</td>
<td>346,245,840</td>
<td>26,333,000</td>
<td>319,912,840</td>
</tr>
<tr>
<td>WASH</td>
<td>33,400,000</td>
<td>80,325,302</td>
<td>6,084,114</td>
<td>74,241,188</td>
</tr>
<tr>
<td>Education</td>
<td>79,800,000</td>
<td>123,211,757</td>
<td>2,459,155</td>
<td>120,752,602</td>
</tr>
<tr>
<td>Child Protection</td>
<td>48,600,000</td>
<td>86,016,472</td>
<td>3,942,743</td>
<td>82,073,729</td>
</tr>
<tr>
<td>Social Protection</td>
<td>100,000,000</td>
<td>100,000,000</td>
<td>0</td>
<td>100,000,000</td>
</tr>
<tr>
<td>Cross-sectoral</td>
<td>5,600,000</td>
<td>34,198,848</td>
<td>7,005,245</td>
<td>27,193,603</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>584,600,000</td>
<td>837,611,077</td>
<td>53,381,276</td>
<td>784,229,801</td>
</tr>
</tbody>
</table>

### Human interest stories and external media

**Human Interest Stories**

- [Vaccination hero on the frontline](#)
- “No bullets. One rose for each child.”
- "All you can hear in town is crying"
- [A lifeline for children: UNICEF Chad brings comfort to refugees from Sudan](#)
Videos
• "No bullets. One rose for each child." 10-year-old Majd drew to tell their experience
• Through eyes of a child: 11-year-old Ali shares his experience of conflict in Sudan
• Personal testimony from a Sudanese UNICEF Staff member on the situation in Sudan

For more information, please contact
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### Annex A

**Summary of Programme Results**
The humanitarian performance table is partially updated due to the low capacity of partners to report on the results due to the issues outlined in the section on challenges.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Health</th>
<th>Nutrition</th>
<th>Child Protection, GBVIE and PSEA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Overall needs (revised)</td>
<td>2023 target (revised)</td>
<td>Total results</td>
</tr>
<tr>
<td></td>
<td><strong>UNICEF and IPs Response</strong></td>
<td><strong>Cluster Response</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children vaccinated against measles</td>
<td></td>
<td>11 million</td>
<td>1,655,308</td>
</tr>
<tr>
<td># of children and women accessing primary health care in UNICEF-supported facilities</td>
<td></td>
<td></td>
<td>3,163,728</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children 6-59 months screened for wasting</td>
<td></td>
<td>4.6 million</td>
<td>5,917,508</td>
</tr>
<tr>
<td># children aged 6 to 59 months with severe wasting admitted for treatment</td>
<td></td>
<td></td>
<td>621,600</td>
</tr>
<tr>
<td># primary caregivers of children 0-23 months receiving IYCF counselling</td>
<td></td>
<td></td>
<td>1,637,337</td>
</tr>
<tr>
<td># pregnant women receiving preventative iron supplementation</td>
<td></td>
<td></td>
<td>1,637,337</td>
</tr>
<tr>
<td># children 6-59 months receiving Vitamin A supplementation</td>
<td></td>
<td>6 million</td>
<td>5,917 508 ii</td>
</tr>
<tr>
<td><strong>Child protection, GBVIE and PSEA</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children and caregivers accessing mental health and psychosocial support</td>
<td></td>
<td>4.3 million</td>
<td>349,200</td>
</tr>
<tr>
<td># women, girls and boys accessing GBV risk mitigation, prevention and/or response interventions</td>
<td></td>
<td></td>
<td>21,000</td>
</tr>
<tr>
<td># people with safe and accessible channels to report SEA by personnel who provide assistance to affected populations</td>
<td></td>
<td></td>
<td>2,346,921</td>
</tr>
</tbody>
</table>

---

**Notes:**

1. For Health, Nutrition, and WASH, total achievement figures and change since the last report have been updated based on data alignment and verification with partners.
2. The Vitamin A supplementation of 1st dose received by 7.46 million children, will be counted once they received 2nd dose during the nutrition screening of children.
<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
<th>UNICEF</th>
<th>UN</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td># children provided with landmine or other explosive weapons prevention and/or survivor assistance intervention</td>
<td>352,000</td>
<td>13,934</td>
<td>12,308</td>
<td></td>
</tr>
<tr>
<td># unaccompanied and separated children provided with alternative care or reunified</td>
<td>14,000</td>
<td>630</td>
<td>248</td>
<td></td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># children accessing formal or non-formal education, including early learning</td>
<td>3,473,900</td>
<td>98,787</td>
<td>1,664</td>
<td>4,300,000</td>
</tr>
<tr>
<td># children receiving individual learning materials</td>
<td>3,473,900</td>
<td>81,305</td>
<td>3,568</td>
<td>4,300,000</td>
</tr>
<tr>
<td># trained teachers/ECD facilitators</td>
<td>57,915</td>
<td>1,218</td>
<td>66</td>
<td></td>
</tr>
<tr>
<td>Adolescents and young people who participate in or lead engagement initiatives through UNICEF-supported programmes</td>
<td>173,746</td>
<td>218</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Water, Sanitation &amp; Hygiene</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># people accessing a sufficient quantity of safe water for drinking and domestic needs</td>
<td>4,000,000</td>
<td>1,791,509</td>
<td>650,303</td>
<td>4,350,000</td>
</tr>
<tr>
<td># of people reached with critical WASH supplies</td>
<td>200,000</td>
<td>113,575</td>
<td>2,595</td>
<td>-</td>
</tr>
<tr>
<td># of people reached with hand-washing behaviour-change programme</td>
<td>4,000,000</td>
<td>823,323</td>
<td>42,604</td>
<td>4,875,923</td>
</tr>
<tr>
<td># of people accessing appropriate sanitation services</td>
<td>300,000</td>
<td>48,755</td>
<td>14,514</td>
<td>911,181</td>
</tr>
<tr>
<td># health facilities with basic WASH services</td>
<td>30</td>
<td>9</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td># learning facilities and safe spaces reached with basic WASH services</td>
<td>50</td>
<td>37</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Social Protection &amp; Humanitarian Cash Transfer (HCT)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of households reached with UNICEF funded humanitarian cash transfers</td>
<td>250,000</td>
<td>51,651</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Cross-sectoral (HCT, SBC, RCCE, gender and AAP)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of people participating in engagement actions</td>
<td>2,000,000</td>
<td>475,403</td>
<td>37,336</td>
<td></td>
</tr>
<tr>
<td># of people sharing their concerns and asking questions through established feedback mechanisms</td>
<td>1,250,000</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

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*Data is not available and will be provided as it becomes available from the cluster*