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Amal, a displaced mother from Khartoum, arrives at a UNICEF-supported mobile clinic in Atbara, River Nile state for a follow-up visit for her 11-month-old daughter Yadin, who is acutely malnourished.

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Humanitarian Situation Report No. 22

Reporting Period
1–31 August 2024

Sudan

HIGHLIGHTS

- Sudan is the world's largest child displacement crisis - an estimated 5 million children have been forced to flee their homes.
- 3.7 million children are projected to suffer from acute malnutrition in 2024. Famine is occurring in Zamzam camp, and 13 other areas are at risk of famine.
- National vaccination coverage for children under-five dropped from 85 per cent before the war to approximately 50 per cent. In active conflict zones the rates are averaging at 30 per cent. The delivery of vaccine supplies and routine immunization activities have been hindered by security concerns and lack of access.
- In 2024, despite challenges, UNICEF and partners reached 7.5 million children and families with safe drinking water, 3.2 million children with malnutrition screening (174,700 with lifesaving treatment), over 2.3 million children and caregivers with psychosocial counselling, learning, and protection support, and 77,700 children, mothers and families with cash information and other critical services.

SITUATION IN NUMBERS

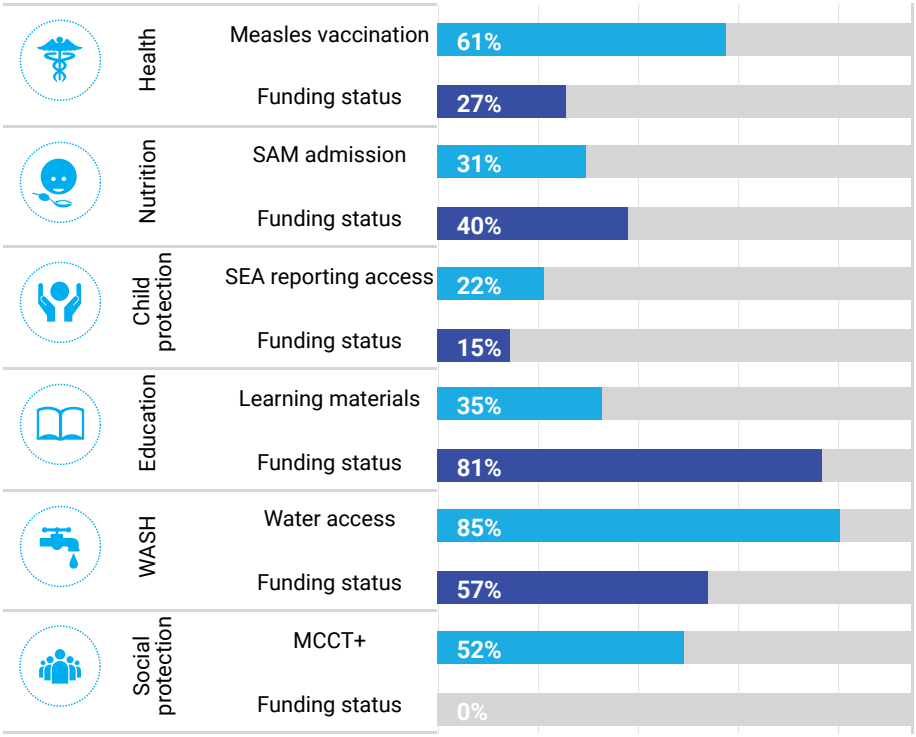
13,600,000
Children in need of humanitarian assistance[1]

24,800,000
People in need of humanitarian assistance

7,600,000
Children targeted by UNICEF response in Sudan[2]

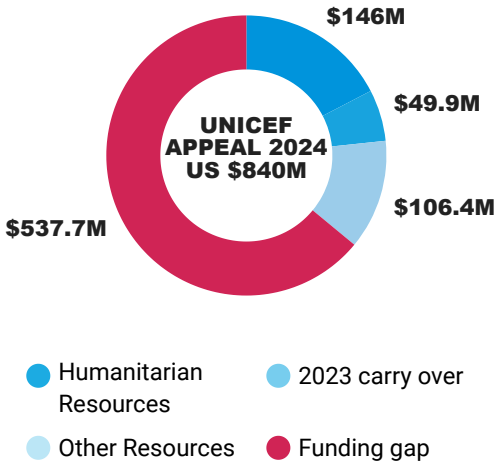
5,000,000
Children displaced internally and across borders

UNICEF RESPONSE AND FUNDING STATUS*



* UNICEF response % is only for the indicator, the funding status is for the entire sector.

FUNDING STATUS (IN US$)**



** 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

The UNICEF Sudan Humanitarian Action for Children (HAC) 2024 is appealing for US$840 million to deliver a package of child protection, education, health, nutrition, WASH, and cash plus interventions to save children's lives, alleviate their suffering and preserve their resilience and dignity. As of 31 August 2024, UNICEF has approximately USD 196 million in humanitarian funding against this appeal, along with an additional USD 106 million in other resources to sustain community resilience and systems for delivery of essential basic services to communities across Sudan.

UNICEF is deeply grateful for the donor partners supporting its three-pronged humanitarian, development and peace nexus response in Sudan in 2024, including the European Union, the governments of Canada, Denmark, France, Germany, Japan, Kuwait, Netherlands, Norway, Sweden, the United States of America and the United Kingdom, as well as the World Bank, Gavi, the Vaccine Alliance, the Global Fund, Global Partnership for Education, Education Cannot Wait, UN Sudan Humanitarian Fund (SHF), UN Central Emergency Response Fund (CERF),and UNICEF National Committees.

Unfortunately, much more needs to be done and the cost of inaction is unacceptably high and continues to rise daily. The ongoing war is putting the wellbeing of 24 million Sudanese children at severe risk, threatening a generational catastrophe with grave implications for the country, the region, and beyond.

We must redouble our joint advocacy efforts for:

- An immediate end to grave violations of children’s rights.
- An immediate ceasefire and steps towards a lasting peace.
- Safe, sustained and unimpeded access into and throughout Sudan.
- Redouble efforts to avoid a systems’ collapse and the continuation of essential services.
- A massive mobilization of resources to prevent a devastating loss of children’s lives, and protect the dignity and future of all vulnerable children.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

In August 2024, the humanitarian situation in Sudan remained dire, marked by ongoing conflict, severe malnutrition, widespread severe food insecurity and disease outbreaks. The conflict, which erupted in April 2023 has displaced over 10.4 million people, including 5 million children. The security situation across conflict-affected states remains tense and unpredictable, although movements along frontlines have slowed due to the rainy season.

An estimated 13 million children are grappling with acute food insecurity in 2024. 3.7 million children under-five are projected to suffer from acute malnutrition in 2024. Rates of severe acute malnutrition (SAM) in children under-five are alarmingly high, with nearly 730,000 children suffering from SAM. The situation in Zamzam camp, North Darfur, has already surpassed the famine threshold. Similar conditions are suspected in two additional IDP camps in El Fasher. There is a risk of famine in 13 other areas if the conflict escalates further. Nearly 143,000 children under-five, living in these areas, suffer from SAM and require immediate treatment. These children are up to 11 times more likely get sick than a healthy child. As the conflict rages on, families and communities trapped in the middle of conflict and hard-to-reach areas continue to bear the greatest burden.

Displaced children often live in overcrowded camps and settlements with limited or no access to adequate shelter, sanitation, and healthcare services – putting them at greater risk of malnutrition and deadly disease outbreaks. A cholera outbreak was declared, with around 8,000 cases reported since 22 July, primarily affecting Kassala state. An estimated 3.1 million people, including 500,000 children under-five, are at risk of cholera between July and December 2024.

The collapse of Arba’at Dam, in Red Sea state, due to heavy rains in the upper catchment area has further aggravated access to drinking water in Port Sudan by reducing the water supply from about 40 liters per person to below 10 liters per day. In addition, recent floods damaged WASH infrastructures in affected states and has further complicated humanitarian access, including the delivery of critical supplies stuck due to poor road conditions.

In 2024, the UN continues to receive information of a significant number of children being killed and maimed due to the impacts of the war. Girls have shouldered a particularly heavy burden, facing terrifying risks to their safety, including rape and other forms of sexual violence.

Schools have only partially opened in six states in Sudan, while more than 17 million of the 19 million school-aged children remain out of school in the country. Teachers have not been paid in months. Hundreds of schools have been damaged since the beginning of the brutal conflict, and many others used as shelters for internally displaced populations, constraining access to education in areas where schools have been partially opened.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health

In response to the cholera outbreak, UNICEF has reactivated a multisectoral inter-agency Cholera Response Plan. This plan focuses on health, water, sanitation, hygiene (WASH) and social and behavioral change (SBC) interventions. It aims to prevent the further spread of the disease and reduce mortality in affected states. Key interventions include the following:

- Coordination: UNICEF facilitated intersectoral coordination for cholera response in Kassala and Gedaref and conducted monitoring and supervision activities in affected localities.
- Access to treatment and controlling the spread of disease: three rounds of case management training have been completed for 117 healthcare providers, including over 40 females, from the affected regions to improve quality of care and reduce case fatality rate (CFR). In addition, efforts have been made to improve access to cholera treatment centers and Oral Rehydration Points (ORPs). UNICEF is supporting six mobile clinics and 31 ORPs established in cholera-affected localities in Kassala, Gedaref, Gezira states providing treatment to approximately 126,000 people (40,300 girls, 31,500 boys, 29,000 women and 25,200 men).
- Strengthening Surveillance and Early Warning Response at the Community Level: UNICEF trained 94 Community-Based Surveillance (CBS) volunteers and is covering communication costs for these volunteers in Kassala to enhance reporting capacity. In the coming weeks, nearly 500 additional CBS volunteers will be trained to ensure timely alerts and responses to cholera cases.
- Supply Delivery: Cholera response supplies were delivered to Kassala, River Nile, Red Sea, Khartoum, and Gezira states to meet the needs of over 140,000 children and their families, providing lifesaving services and effectively mitigating the outbreak. Additionally, UNICEF has procured and delivered US$ 1.5 million worth of cholera supplies to affected states. The supplies include 145 acute watery diarrhea (AWD) kits, 490 cartons of oral rehydration salts (ORS), 640 packs of zinc sulfate, 3,400 packs of erythromycin, and 71,000 infusion sets.

In response to the collapse of the Arba'at Dam in Port Sudan, Red Sea State, UNICEF and its partners are undertaking critical measures to address the needs of those affected by providing Primary Health Care (PHC) interventions to approximately 50,000 mothers and children in the flood-affected areas of Ganoub, Olib, and Tokar. These interventions include medical care, emergency health services, and essential supplies to ensure the well-being of the affected individuals, aiming to address immediate health needs and mitigate the impact of the flooding on vulnerable populations.

In response to the ongoing malaria outbreak, UNICEF delivered 1,700 doses of Artemether Lumefantrine tabs, the first-line malaria drugs of different strengths, and four integrated management of childhood illness (IMCI) kits in the Darfur states. The supplies are adequate to treat approximately 40,000 people for two months, including 1,700 malaria cases.

Additionally, as of August, over 846,300 children have been vaccinated against measles.

To ensure the continuation of lifesaving interventions and address the worsening situation in Zamzam camp in North Darfur, as well as in South and East Darfur states, essential health supplies were delivered to support an estimated 1,070,000 children and their mothers.

Nutrition

The nutrition situation in Sudan continues to deteriorate, primarily due to conflict-driven food insecurity, which has been exacerbated by the displacement of over 10 million people, multiple disease outbreaks, and flooding. Results from six SMART surveys conducted in August (three in North Darfur and three in West Darfur) reveal an alarming situation, even in localities outside the 14 areas most at risk of famine. Global acute malnutrition (GAM) rates are above 20 per cent in all six surveyed localities, with two of them, Al-Taweisha and Um Keddada, exceeding the Integrated Food Security Phase Classification (IPC) famine threshold of 30 per cent. As of 2024, a total of 31 SMART surveys have been completed, covering 36 localities. In these surveys, the GAM rate was above the 15 per cent emergency threshold in 29 localities and above 30 per cent in three localities.

In this context, UNICEF continues to scale up the provision of lifesaving preventive and curative nutrition interventions across Sudan, integrated with health, WASH and other services, with increased focus on localities experiencing extremely high and rising levels of nutrition and food insecurity. In August, 353,931 under-five children were screened and 24,280 children with SAM were treated as part of early detection and treatment of acute malnutrition. As part of continued efforts to prevent a further deterioration in the malnutrition situation, 58,485 care-givers of children 0-23 months were reached with infant and young child feeding counselling while 27,613 pregnant women received iron and folic acid through ante-natal care.

UNICEF's focused response in the 14 areas at highest risk of famine includes enhancing integrated health and nutrition service delivery in 155 health facilities and 22 mobile sites through new and scaled-up partnerships, while also increasing collaboration with WASH and food security interventions. UNICEF will continue to prioritise increasing access to critical integrated health and nutrition services with partners in these 14 areas, as well as in other localities experiencing high levels of nutrition and food insecurity.

Water, sanitation and hygiene[3]

UNICEF remained the largest contributor to the WASH sector response in Sudan, achieving notable results across 14 of the country's 18 states while maintaining nationwide presence and leading sector coordination. Key accomplishments included scaling up WASH interventions, including in line with famine prevention response plan, in cholera affected states[4] , where 728,300 people sustained access to safe water supply[5] and around 14,600 benefitted from improved sanitation services – two critical elements to curtail disease transmission routes.

UNICEF also assessed areas affected by the Arba'at's dam collapse in Red Sea state, which impacted surrounding communities and caused significant disruption to Port Sudan's water supply availability. As it finalizes a Draft Response Plan which covers immediate, midterm and long-term needs, UNICEF provided firsthand assistance to over 1,140 affected families, by distributing WASH critical supplies to restore their access to clean water (chlorine tablets for household use and jerry cans) as well as to ensure basic hygiene practices (soap). UNICEF also provided WASH supplies to 21,518 flood affected people in River Nile, Northern and Kassala states.

Child protection, GBViE and PSEA

The ongoing conflict in Sudan continues to severely impact children and their families, resulting in numerous protection issues such as killings, abductions, and the denial of basic rights. Children are frequently caught in the crossfire, with many being killed or injured by small arms or explosive remnants of war. There has been a significant increase in the recruitment and use of children in combat roles. Many

children, particularly girls, face rape and other forms of sexual violence. Educational and medical facilities are frequently targeted, disrupting essential services for children.

The conflict has severely restricted humanitarian aid, leaving millions of children without access to essential necessities such as food, water, shelter, and healthcare. Many children have been separated from their families, increasing their vulnerability to abuse and exploitation.

In August, UNICEF reached over 201,100 individuals with different child protection services, including 157,300 children (73,300 girls) and 43,900 caregivers through child protection in emergency programmes. These services included mental health and psychosocial support (MHPSS), gender-based violence (GBV) prevention, risk mitigation and response services, identification and reunification of unaccompanied and separated children (UASC), and explosive ordnance risk education (EORE).

Nearly 108,500 people received MHPSS services, comprising 94,700 children (39,100 girls and 55,600 boys) and 13,800 caregivers (8,500 women). In coordination with partners and members of the child protection community network, UNICEF reached 16,100 children (11,000 girls and 5,100 boys) and 8,200 adults (all women) with GBV risk mitigation, prevention, and response interventions. Furthermore, 315 unaccompanied and separated children (116 girls and 199 boys) were provided with alternative care or reunited with their families.

The established child community protection network, in partnership with local radio stations, enabled UNICEF to reach over 60,000 individuals (21,800 adults and 46,200 boys and girls) with safe and accessible channels for reporting sexual exploitation and abuse (SEA) by personnel who provide assistance to affected populations.

Education



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Wisam, 9-year-old, attends a class at Salalab Eastern Basic and Primary School for Girls and Boys in Port Sudan. When fighting reached Sennar, Wisam and her family were forced to flee to Port Sudan.

Five hundred days of conflict have triggered one of the most severe learning crises in the world. Nearly 18 million children in Sudan—representing
90% of the school-age population—are currently out of school and in desperate need of educational support. Only seven out of the 18 states (Northern, River Nile, Red Sea, Kassala, Gadaref, Blue Nile, and Sennar) have managed to reopen schools. However, schools in River Nile and Red Sea are on summer break. In Sennar, schools were forcefully closed due to escalating security concerns. Also, over 2,600 schools across all the states in Sudan, once-safe-havens for learning, now serve as shelters for internally displaced persons.

In response to this, UNICEF and its partners have provided both formal and non-formal education to over 2 million children since the conflict began. Of these, more than 1.5 million children have accessed formal education in reopened schools, supported by UNICEF through school grants, essential learning supplies, and back-to-learning campaigns. Furthermore, UNICEF has established over 1,900 safe learning spaces, benefiting more than 513,690 children (52% girls) with structured learning and psychosocial support.

In August alone, 206 new safe learning spaces were created, benefiting over 41,301 children (55% girls). Among these children, nearly 22,132 (56% girls) received essential learning materials. 262 adolescent-led child clubs were established, engaging over 12,390 adolescents in sports, cultural, and health activities. Additionally, over 460 facilitators have been trained and equipped with the skills necessary to support children's well-being and learning.

UNICEF's Learning Passport continues to be a vital resource, enabling conflict-affected girls and boys to access the school curriculum online. Currently, over 53,430 children (54% girls) are enrolled in structured learning programs through the Learning Passport and the Let Us Learn Initiative.

Social Inclusion and Cash Assistance

UNICEF continues to leverage its flagship Mother and Child Cash Transfer Plus (MCCT+) programme to expand social protection coverage for women, children and families, even in the face of the current fragile humanitarian context.

To date, MCCT+ has reached 78,000 women and 390,000 children and family members across 11 localities in the two eastern states of Kassala and Red Sea. The programme is currently being expanded to reach an additional 15,000 women and 75,000 children and family members in the central state of River Nile, which is hosting one of the biggest IDP populations in Sudan. In consultation with stakeholders in River Nile state, 25 PHC facilities in Atbara and 40 facilities in Ad Damar have been selected as MCCT+ sites. UNICEF and partners will

ensure that these facilities have adequate capacity to provide a minimum package of essential services to children, pregnant women and lactating mothers.

Across the three states where MCCT+ is implemented, UNICEF is working towards systematically integrating birth registration as a core component of the programme. UNICEF is collaborating with the Civil Registry to organize mobile birth registration teams to register children receiving support from MCCT+. Moving forward, UNICEF will ensure that mobile birth registration is present at Primary Health Care (PHC) facilities during registration and cash distributions. This is particularly important in the current context, as families have faced challenges in registering their children's births since the outbreak of conflict in April 2023.

Cross-cutting areas

Social and Behaviour Change (SBC)

UNICEF and partners engaged 66,900 children, caregivers and community members to promote positive behaviors, support service uptake and preventative practices for multiple outbreaks, including cholera, in affected states. UNICEF conducted an SBC campaign during the novel oral polio vaccine type 2 (nOPV2) campaign in five states. Close to 24,400 people were directly engaged through religious and community leaders, community volunteers, media personnel and social media. More than 80,100 people were reached with messages on polio through social media platforms. Close to 57,100 people were engaged through Risk Communication and Community Engagement (RCCE) interventions, including Focus Group Discussions, radio and TV broadcast, social media and IEC material in River Nile, Gedaref and Kassala. SBC/RCCE interventions in Northern state engaged community initiatives in the flood response to support dissemination of life-saving messages during evacuation.

UNICEF engaged 900 people on the Back to Learning (BTL) campaign in River Nile state to improve poor enrollment and reduce the rate of dropout. The mobile cinema engaged 4,200 community members to promote positive practices in four states.

Competing priorities for affected populations across Sudan, along with multiple outbreaks, shifting social dynamics, and a shortage of flexible funding, continue to constrain RCCE interventions. In response, UNICEF utilizes a mixed strategy to effectively reach mobile populations while engaging and empowering existing community structures to ensure sustainability.

Online social and community listening plays a critical role in understanding the concerns of affected populations in real-time. Monitoring social media platforms and online forums provided critical insights related to perceptions, misinformation, and emerging issues related to immunization, polio and MPOX.

Accountability to Affected Population (AAP)

UNICEF continued to scale up its commitment to integrate and mainstream accountability to affected populations across all sectors and implementing partners. Community-based complaints and feedback mechanisms (CFM) are being strengthened, with CFM staff conducting two weeks of field monitoring visits to 16 distribution sites in Aroma, Kassala, during the MCCT+ distribution. This aims to ensure the mainstreaming of AAP/CFM and to support sensitization, feedback collection, and resolution.

This month, the interagency toll-free hotline 6664 was made available to three mobile network operators, to support the affected population with utilizing the hotline.

During the reporting period, over 1,500 cases were reported through different channels, with 98 per cent of these cases coming from women. Of these, 83 per cent have been resolved through information provision, referrals, and case management by relevant focal points, while 17 per cent are still being processed. CFM has also supported payment verification for frontline workers as part of its monitoring role, targeting more than 1,000 women with outbound sensitization calls on to receive their assistance after no-show exercise.

Prevention of Sexual Exploitation and Abuse (PSEA)

UNICEF continued to enhance collaboration and coordination among stakeholders on PSEA issues, improving partners' capacity to prevent, identify, and mitigate sexual exploitation and abuse (SEA) risks, as well as to respond to and refer survivors for support.

Specific activities include the following:

- PSEA Trainings: Conducted training sessions for 79 individuals, including UNICEF partners and members of the WASH and Nutrition sectors.
- Community Awareness Campaigns: Joint PSEA/Child Protection and SBC outreach campaigns were held, using community radios and face-to-face interactions to reach over 5,000 internally displaced persons (IDPs) and host communities in River Nile State.
- PSEA Risk Assessments: An institutional PSEA capacity assessment was conducted for five new partners in Child Protection and WASH in Blue Nile, East Darfur, and Kassala.
- Coordination: The PSEA team actively participated in various coordination meetings, including those on GBV, Child Protection, regional meetings, and other internal and external forums, advocating for meaningful inclusion and a focus on vulnerable children’s needs in humanitarian responses. Furthermore, UNICEF led AAP/PSEA Working Group meetings at the state level in Gezira and West Darfur. Members map community-based complaints and feedback mechanisms, conduct SEA risk assessments in their respective operational areas, and take appropriate actions to address identified SEA risks with technical support from the UNICEF PSEA team.

Supply and Logistics

Since the start of the conflict, UNICEF delivered approximately 32,000 metric tons of critical lifesaving supplies across Sudan, of which 19,500 metric tons was delivered between January and August 2024. Of this, approximately 11,160 metric tons were dispatched to hotspot areas in Kordofan, Darfur, Khartoum, and Gezira states, while 20,816 metric tons were sent to non-hotspot states, including Red Sea, Kassala, Gedaref, White Nile, Sennar, Blue Nile, River Nile, and Northern state.

In August, 3,411 metric tons of WASH, education, health, and nutrition supplies were delivered, including 980 metric tons sent to Darfur states via Chad. This included 2,884 cubic metres of child protection, health, nutrition, education, and WASH supplies, which were received via Port Sudan by both air and sea. On 1 August 2024, two charter flights delivered 42,000 doses of the BCG vaccine and 458,856 boxes of artesunate malaria injectables under the Global Fund. Additionally, 4,714 cubic meters of supplies are currently undergoing customs clearance in Port Sudan. An immediate offshore supply pipeline of lifesaving supplies worth 3,420 cubic meters is expected to arrive in Port Sudan by the end of November 2024.

UNICEF received 3,090 cubic meters worth of supplies from Chad through cross-border operations, while 6,290 cubic meters of supplies have arrived at the port and are undergoing customs clearance. Furthermore, 3,527 cubic metres of lifesaving supplies are in transit and expected to arrive in Chad by the end of November 2024.

The total procurement for goods and services stands at US$ 97 million, constituting 59 per cent of the supply plan of US$ 165 million. A funding gap of US$ 64 million has been identified for goods to urgently meet needs and replenish stocks for distribution to beneficiaries in states highly impacted by the conflict in the first quarter of 2025.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

UNICEF remains a key member of the Humanitarian Country Team (HCT) and the Inter-Cluster Coordination Group at both the country and field levels, contributing to interagency efforts including access groups, logistics, and localization. UNICEF leads the Education, Nutrition, and WASH sectors, as well as the Child Protection Area of Responsibility (AoR) in Sudan. The Education sector is co-led by Save the Children, the Child Protection AoR is co-coordinated by Plan International, and the WASH sector is co-coordinated by LM International. UNICEF is also a vital actor in the Health sector, leading primary health and maternal and child health initiatives, and chairs the AAP/Community Engagement (CEA) working group.

By August 2024, WASH humanitarian activities reached 8.5 million people. Over 4.6 million individuals accessed basic water services due to partner support for the operation and maintenance of water stations, including urban water treatment plants. Water trucking expanded geographical coverage and was critical in providing safe drinking water to communities affected by the damage to the Arba'at water dam in Red Sea State. The scale-up of cholera and flood response interventions allowed 900,000 people to access adequate, protected, and gender-sensitive sanitation services in gathering sites (camps and public institutions). Additionally, the WASH sector supported activities to improve environmental conditions, including vector control campaigns and solid waste management targeted at public areas and gathering sites. More than 3.7 million individuals were reached through gender-sensitive hygiene promotion, complemented by the distribution of emergency WASH non-food items to encourage positive hygiene practices. The WASH cluster conducted an analysis to assess the country's WASH needs and determine the People in Need (PIN) for 2025. Cholera and famine gaps are currently being evaluated, and partners have been mobilized to be present in critical locations.

The Nutrition Cluster revised its methodology for estimating the 2025 PIN. The cluster strengthened its capacity by recruiting, for the first time, a sub-national Information Management Officer (IMO) through UNICEF’s standby partner arrangement, who will focus on the Darfur States while also supporting the other sub-national hubs across the country.

The Child Protection AoR continued to enhance the effectiveness and coordination of child protection prevention and response efforts across the country, including in hotspot areas. In August, in collaboration with child protection partners and communities, close to 15,500 children and their families (over 8,000 females) accessed mental health and psychosocial support services as well as parenting programs. Additionally, 534 children (268 girls) benefited from tailored case management services, which included family reunification for unaccompanied and separated children (UASC) and alternative care arrangements. Awareness-raising interventions aimed at prevention reached over 36,500 people (8,000 boys, 6,400 girls, 10,000 men, and 12,100 women).

The Education Cluster continued to advocate for the reopening of schools and ensure the provision of alternative learning opportunities for children who have been unable to resume formal education. In August, the Education Cluster worked with members of the Inter-Cluster Coordination Group (ICCG) to advance collaboration towards finding reasonable solutions for sheltering IDPs in schools. To support the most vulnerable children in continuing their education, the cluster scaled up its efforts to provide access to formal and non-formal education opportunities, as well as teaching and learning materials. As of August, the education emergency response reached 591,300 crisis-affected children, 319,300 of whom are girls, with direct support in Safe Learning Spaces and alternative learning spaces, ensuring access to a safe and protective learning environment. To strengthen sub-national cluster coordination, the Education Cluster secured support from the Standby Partners (SBP) Unit for a sub-national cluster coordinator for the Darfur region. All arrangements for the selection and deployment have been completed for a September deployment, which will contribute timely to the finalization of the Humanitarian Response Plan (HRP) 2025 and enhance coordination capacity in Darfur, one of the areas most affected by the conflict in Sudan.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA

During the reporting period, UNICEF Sudan published the following articles, press release and videos.

- Article: Children under fire
  https://www.unicef.org/sudan/stories/children-under-fire
- Article: Building trust, saving lives
  https://www.unicef.org/sudan/stories/building-trust-saving-lives
- Article: Sudan’s children face climate and conflict challenges
  https://www.unicef.org/sudan/stories/sudans-children-face-climate-and-conflict-challenges
- Article: Rebuilding life together
  https://www.unicef.org/sudan/stories/rebuilding-life-together
- Video: UNICEF Representative Sheldon Yett's visit in Sudan's Atbara
  https://www.youtube.com/watch?v=YTTWytCNq_E
- Video: Volunteers at a safe learning space in Darfur provide healing to children
  https://www.youtube.com/watch?v=Q1po1TL8YqY
- Video: UNICEF Representative Sheldon Yett's visit to a Makanna site in Port Sudan
  https://www.youtube.com/watch?v=DHxJPKAKlKI
- Video: First UN mission to #Darfur's Zelingei, Jebel Marra and Tawilla
  https://www.youtube.com/watch?v=mz5hWWdgxTg
- Video: Sudan’s children face climate and conflict challenges
  https://www.youtube.com/watch?v=qg0GJX-Is7U
- Video: A shell struck a UNICEF child-friendly space in Khartoum
  https://www.youtube.com/watch?v=zNAlyGM6gbM
- Press release: Sudan rolls out second vaccination campaign to stop polio outbreak
  https://www.unicef.org/sudan/press-releases/sudan-rolls-out-second-vaccination-campaign-stop-polio-outbreak
- At least five children reportedly killed and 20 injured in shelling of school and market in El Obeid
  https://www.unicef.org/sudan/press-releases/least-five-children-reportedly-killed-and-20-injured-shelling-school-and-market-el

HAC APPEALS AND SITREPS

- All Humanitarian Action for Children Appeals
  https://www.unicef.org/appeals
- All Situation Reports
  https://www.unicef.org/appeals/situation-reports

NEXT SITREP: 1–30 SEPTEMBER 2024

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2024 targets	Total results	Progress*	2024 targets	Total results	Progress*
Health								
Children vaccinated against measles	Total	-	1.4 million	846,344	▲ 2%	-	-	-
Children and women accessing primary healthcare in UNICEF-supported facilities	Total	-	3 million	1.2 million	▲ 7%	-	-	-
Nutrition								
Children 6-59 months with severe wasting admitted for treatment	Total	-	558,268	174,720	▲ 4%	558,268	174,720	▲ 4%
Children 6-59 months screened for wasting	Total	-	6 million	3.2 million	▲ 4%	6 million	3.2 million	▲ 4%
Primary caregivers of children 0-23 months receiving infant and young child feeding counselling	Total	-	1.7 million	384,259	▲ 3%	1.7 million	384,259	▲ 3%
Child protection, GBViE and PSEA								
Children, adolescents and caregivers accessing community-based mental health and psychosocial support	Total	-	3.4 million	2.3 million[6]	▲ 3%	373,959	394,873	0%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	149,766	165,280[7]	▲ 16%	60,133	5,483[8]	0%
People with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations	Total	-	2.9 million	636,297	▲ 2%	-	-	-
Unaccompanied and separated children provided with alternative care and/or reunified	Total	-	21,966	2,572	▲ 1%	23,933	2,554[9]	0%
Education								
Children accessing formal or non-formal education, including early learning	Total	-	2.9 million	2.1 million[10]	▲ 2%	4.2 million	421,486	▲ 3%
Children receiving individual learning materials	Total	-	1.2 million	409,193	▲ 2%	4.2 million	169,805	▲ 1%
Water, sanitation and hygiene								
People accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	-	8.9 million	7.5 million[11]	▲ 10%	4.9 million	8.3 million	▲ 22%
People accessing appropriate sanitation services	Total	-	300,000	154,968	▲ 7%	1.5 million	1.1 million	▲ 10%
People reached with hand-washing behaviour-change programmes	Total	-	5 million	3.6 million	▲ 5%	6.3 million	4.3 million	▲ 9%

People reached with critical WASH supplies	Total	-	750,000	401,458	▲ 4%	-	-	-
Social protection								
Households reached with UNICEF-funded humanitarian cash transfers[12]	Total	-	150,000	77,727	▲ 3%	-	-	-
Cross-sectoral (HCT, C4D, RCCE and AAP)								
People who participate in engagement actions	Total	-	5.3 million	2.6 million	▲ 1%	-	-	-
People sharing their concerns and asking questions through established feedback mechanisms	Total	-	12,500	25,877	▲ 66%	-	-	-

**Progress in the reporting period 1–31 August 2024*

ANNEX B — FUNDING STATUS

Consolidated funding by sector

		Funding available			Funding gap	
Sector	Requirements	Humanitarian resources received in 2024	Other resources used in 2024	Resources available from 2023 (carry over)	Funding gap (US$)	Funding gap (%)
Health (including public health emergencies)	207,360,985	18,803,785	24,406,660	13,616,447	150,534,093	73%
Nutrition	206,170,626	57,938,103	8,000,000	16,944,836	123,287,687	60%
Child protection, GBViE and PSEA	117,625,351	10,440,005	6,400,000	1,332,123	99,453,223	85%
Education	80,103,091	11,677,768	50,000,000	2,976,090	15,449,233	19%
Water, sanitation and hygiene	89,551,000	29,634,701	17,000,000	4,776,455	38,139,844	43%
Social protection	100,000,000	-	-	332,897	99,667,103	100%
Cross-sectoral (HCT, SBC, RCCE and AAP)	39,188,947	17,499,864	600,000	9,940,414	11,148,669	28%
Total	**840,000,000**	**145,994,226**	**106,406,660**	**49,919,262**	**537,679,852**	**64%**

**repurposed other resources with agreement from donors*

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ENDNOTES

1. Sudan Humanitarian Needs and Response Plan 2024 https://reliefweb.int/report/sudan/sudan-humanitarian-needs-and-response-plan-2024-december-2023

2. UNICEF Sudan: Humanitarian Action for Children Appeal 2024 (revision) https://www.unicef.org/media/162941/file/2024-HAC-Sudan-rev-Aug.pdf

3. Achievements are driven by engagement with 25 implementing partners (80% of which national NGOs) implementing 36 program documents and delivering a portfolio of over USD 21.8 million in cash and supply (on average 93%, funded by UNICEF).

4. Gedarif, Kassala, Gezira, Khartoum, and River Nile.

5. 65,000 through water source rehabilitation and 663,300 through operation, and maintenance and/or chlorination of water sources.

6. MHPSS targets vs results are reflective of an integrated approach with the Education, where children benefitting from e-learning in safe learning spaces (Makanna) received MHPSS support. As a result, UNICEF results report on cumulative Child Protection and Education results for this indicator (as children receiving MHPSS are counted whether in formal or informal learning spaces), while the cluster results for this indicator does not include Education results. Additionally, UNICEF includes the number of refugees for this indicator, while the sector does not.

7. UNICEF results include the number of refugees, while the sector results do not include the refugees for the GBV indicator.

8. Cluster GBV results adjusted to reflect the accurate data.

9. Cluster unaccompanied and separated children results adjusted to reflect the accurate data.

10. UNICEF has reached 2 million children through formal and non-formal education. This notable achievement can be attributed to the number of children enrolled in reopened schools. Specifically, over 1.5 million children who have gained access to formal education in reopened schools. Also, the access to education (formal and informal) through UNICEF-supported programmes refers to children in humanitarian settings whose participation in formal or non-formal early learning/pre-primary, primary, general lower or general upper secondary education, is directly attributable to programmes supported through funds managed by UNICEF, within the reporting year. Whereas the definition of this indicator for the Education cluster is slightly different. As a result, the UNICEF and cluster results are not the same.

11. Water supply achievements are mainly driven by interventions of an emergency and lifesaving nature (such as water trucking and chlorination) as a response to the most immediate needs, and which have a higher reach. Despite these gains, the funding gap reflects investment needed to sustain the services for the remaining part of 2024 through supply pipeline and operation and maintenance support to utilities and transition to more permanent interventions such as the construction of new facilities as well as the funding needed to sustain the services established, for the duration of the emergencies - an effort likely to be affected by the compounding climate change driven shocks which drive water demand up (hotter than usual summer season in Easter states and flood challenges within the riverine ones). Also, for UNICEF, water access indicator includes the number of beneficiaries (number of people) in humanitarian situations who have access and use safe water provided by UNICEF. This includes populations accessing and using new and existing drinking water sources as a result of water trucking, chlorination and/or water systems' repair/rehabilitation, as a continuous intervention that runs for a minimum of 3 months or until normal systems are resumed. Whereas, for the cluster, the definition for this indicator is slightly different because of which the UNICEF and cluster results are not the same.

12. MCCT+ cash distribution results were achieved using traditionally resilience/development-focused funding, which complements the results achieved via humanitarian funding to sustain systems and resilience for delivery of basic services to communities across Sudan.