Sudan Regional Crisis

EMERGENCY SITUATION UPDATE
JUNE 28TH, 2023

OVERVIEW

Fighting between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) erupted on 15th April 2023 and has continued for over ten weeks, with areas of Darfur and Khartoum most affected.

In Sudan, according to UNOCHA, nearly 2.1 million people have been displaced since the conflict began, with many fleeing to safer locations inside and outside the country. Limited supplies of food and water have been reported, with what is available being quickly taken by armed groups. The fighting has destroyed key infrastructure in the country with approximately 60% of health facilities currently nonfunctional. Incidents of criminality are also on the rise making it unsafe for households to venture outside.

As a result of the conflict, there has been a significant influx of refugees/returnees from Sudan to South Sudan and Chad. UNHCR estimates over 90,000 refugees/returnees have already arrived in South Sudan and 150,000 in Chad. The majority are women and children with little food and few possessions. There are major gaps in food, shelter, WASH facilities, and other basic services in transit sites and refugee camps in both South Sudan and Chad, straining the ability of the humanitarian community to provide essential assistance.
The current humanitarian situation is desperate with access to core necessities currently described as impossible. Limited supplies, destroyed infrastructure, and increasing incidents of criminality and gender based violence have all been reported to OCHA over the last several weeks.

Because of continued fighting, there are still no aid corridors and humanitarian organizations are unable to safely operate. The overall security situation in Sudan is stopping humanitarian staff from reaching vulnerable people. This threatens to further impact millions of vulnerable Sudanese, especially those displaced by the ongoing fighting.

Humanitarian and logistical access into the country continues to be frustrated by a lack of cooperation at surrounding international borders. Prepositioning of humanitarian supplies is not possible in Khartoum and Darfur as they remain inaccessible. This will further complicate aid operations with the onset of the rainy season in June. Processing of entry visas for International Organizations staff is also not possible as the ongoing conflict has disrupted some government services.

18,135 households have crossed from Sudan into Renk County. Those fleeing are predominantly South Sudanese (92.7%). Women and children (0-5yrs) constitute 51% and 21%, respectively, while the elderly comprise 6.5%.

At transit centers in Renk, the total number of individuals is about 11,000 (growing from the previous average of about 7,000). Similarly, the number of those settling in spaces outside transit centers within Renk town has also grown. The state government has halted onward movement from Renk following tribal conflict on 8th June 2023.
To make matters worse, a Measles outbreak has been confirmed in Renk by the World Health Organization with a total of 70 cases and two mortalities reported to date.

With the closure of onward movement through Renk, there is an influx of people to Palouch with the hope of catching flights to Juba. An estimated 250-300 people arrive at Palouch airport daily. At the moment, an estimated 6,800 are stranded in Palouch airport without appropriate water and sanitation facilities and services, while demand for basic health care services, food and non-food items is high. This situation is worsening with the increasing rain.

To date, 2,375 individuals from 801 households received through Renk and Blue Nile corridor have been settled in Doro Refugee Camp in Maban under the leadership of the United Nations High Commissioner for Refugees.

CHAD
According to UNHCR, 150,000 Sudanese refugees have arrived in Chad, and the projection is that by the end of the 2023, 250,000 refugees will have arrived in the country.

Assessments and field investigations show that the majority of refugees are women and children, having endured a wait of 21 days or more to be resettled in safer locations in refugee camps in the east. Many arrive after fleeing for their lives, suffering psychological trauma, possessing nothing and in need of urgent care and support.

The resettlement of refugees from the 20 border sites to refugee camps off the border continues, albeit slowly. UNHCR is accelerating its efforts to relocate refugees from the border areas to current and newly planned camps, increasing transport, registration and reception capacities.

UNHCR reports gaps in shelter, WASH facilities and other basic infrastructure and services in existing refugee camps, where refugees will initially be resettled.
EMERGENCY SITUATION UPDATE

RELIEF INTERNATIONAL’S RESPONSE

Relief International is responding to the current humanitarian crisis in Sudan and South Sudan, and is establishing operations in Chad.

SUDAN

In Sudan, RI’s response is primarily focused on health, nutrition, and WASH support for affected communities in North Darfur and Blue Nile. RI is providing emergency nutrition services (screening and treatment of malnutrition cases), outpatient department consultations, referrals, and outreach services at 24 health facilities and 5 nutrition centers. RI has provided 8,375 consultations (1,016 are secondary care level and 7,356 are primary health care consultations) since the crisis began.

At RI’s 18 health facilities in North Darfur and 5 in Blue Nile, we are trucking potable water on a daily basis. RI trucked at least 570 barrels of potable water to targeted health facilities, thus achieving 5 liters/outpatient/day. Because of the increase in cases of diarrhea, RI has scaled up its hygiene promotion activities and 3,255 individuals have been reached with safe hygiene practice messages.

RI also continues to screen for malnutrition. RI has screened a total of 418 children under the age of five between June 17th and June 23rd, which marks an increase compared to the previous week’s screening of 381 children. Among those screened, 184 children were admitted into RI’s Outpatient Therapeutic Program for treatment.

RI’s stabilization center is currently not operational and it remains closed. RI’s Targeted Supplementary Feeding Program services also continue to be suspended in North Darfur due to a shortage of supplies.

SOUTH SUDAN

RI is responding in three counties of South Sudan; Renk, Melut, and Maban.

In Renk, RI is providing health care services through the clinic established at the transit center on the Sudan border. Services offered include out-patient consultation, immunization, nutrition surveillance and referral of malnourished to nutrition partners, sexual reproductive health, and clinical management of gender based violence cases. At Abukadra Primary School where about 2,300 returnees have settled, RI is providing health services despite the stretch on human resources and medical supplies. A total of 1,280 Under-5s and pregnant and lactating women were screened for malnutrition. In total, RI staff have provided 7,463 primary health care consultations in Renk since the conflict began.

In Melut, RI has mounted an integrated mobile health and nutrition unit at the Palouch transit site, cumulatively reaching 1,652 individuals, with children under-5 accounting for 45% of all consultations. Seven referrals were made to nearby hospitals and key morbidities include malaria, acute watery diarrhea, and acute respiratory disease in descending order. A total of 736 Under-5s and 143 pregnant and lactating women were screened for malnutrition.

In Maban, RI is providing a 10 day ready to use therapeutic nutritional food package for all children from 6-59 month at reception centers. Vaccination of children 0-5 years is ongoing at reception centers and routinely at nearby health facilities. 218 children have been screened for malnutrition. Also, RI’s maternal infant and young child nutrition team continues to provide general health education and counseling on nutrition messaging, as well as specific messaging on exclusive breastfeeding, complementary feeding, and good hygiene practices for pregnant and lactating women.

CHAD

RI is working towards starting operations in Chad. A scoping mission to the east of Chad revealed significant needs, especially in the areas of primary health and nutrition in the new refugee camps. RI has established a presence in N’djamena and is working collaboratively with UNHCR to start programs as soon as possible.

Relief International will also be establishing a supply chain base to support our North Darfur programs in Sudan from Chad.
EMERGING NEEDS ON THE GROUND

As the situation evolves and changes, new needs are emerging among affected populations in Sudan, South Sudan and Chad.

SUDAN
From RI’s rapid needs assessment conducted in May 2023, malnutrition levels are high due to an inability to access food, poor breastfeeding practices due to trauma, and lack of adequate water supply. RI’s assessment team also observed poor hygiene practices that could lead to disease outbreaks, especially in temporary IDP camps. Protection was a major concern for the IDPs interviewed during the rapid needs assessment. The protection risks mentioned included gender-based violence at the household level due to reduced resources and an inability to venture outside the temporary IDP camps for safety reasons.

SOUTH SUDAN
The influx of refugees and returnees has resulted in an overburdening of existing health facilities. Host community facilities in Renk and Melut are strained, resulting in frequent stock outs of selected essential medicines, and there is a stretch on the existing WASH facilities.

As a result, a measles outbreak has already been reported in Renk and there is a high chance this will spill over to Maban and Melut or even to other final destinations of returnees. The trend of acute watery diarrhea in out-patient consultation has gradually increased, increasing the risk of a cholera outbreak at the same time. In addition, cases of malnutrition among the returnees, including those with medical complications, are also increasing.

CHAD
The supply chain, communication, banking and fuel supply are not affected in Chad. However, with the commencement of rainy season there is fear that the road network will be negatively affected and the movement of people and goods will be impacted.

For the Sudanese refugees in Chad, the primary needs are health and nutrition, mental health support, shelter, food, WASH, protection, and gender based violence prevention and response.
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RESPONSE COORDINATION AND PLANNING

Since the onset of the crisis, RI has been working closely with local, national and international organizations to ensure that all planned interventions are successful.

SUDAN
RI is working with HAC, the Office of Humanitarian Affairs, UNICEF, the World Health Organization, and other stakeholders, including INGOs, local NGOs, and the local administration and line ministries, in particular the Sudanese State Ministry of Health, on a near daily basis.

RI continues to provide updates to multiple layers of stakeholders within the region, including the various thematic working groups, regarding the current and emerging gaps, issues, and challenges in reaching the most vulnerable populations of Sudan.

SOUTH SUDAN
RI is working in close coordination with the Health Cluster, South Sudanese State Ministry of Health, and county Health Department in implementing its response. As the Health lead partner in the three counties, RI is an active member of the county-level health and nutrition clusters and the county based health, WASH and nutrition sector weekly coordination meetings.

RI is also working closely with UNHCR, IOM and the Relief and Rehabilitation Commission who have been mandated with the coordination of the Sudan crisis response.

CHAD
RI has been participating in cross border coordination meetings led by UNOCHA and UNHCR. RI is represented in all key clusters including health, nutrition, WASH, food security, and protection.
DONOR MESSAGING

RI would like to thank donors for their flexibility and support which enables RI to quickly deploy resources to where they are most urgently needed.

At this critical time more funding is required to respond to the aforementioned humanitarian crisis in Sudan, South Sudan and Chad. In Sudan, additional funding would ensure delivery of critical humanitarian supplies around the country, and would allow RI to restore much needed health facilities that have been rendered non-functioning as a result of the crisis. In South Sudan and Chad, more funding would allow RI to respond to the continuous flows of refugees/returnees, who are crossing the border in need of health, nutrition, food, and WASH support. On 19 June, the High-level Pledging Event to Support the Humanitarian Response in Sudan and the Region took place. The event was co-hosted by the United Nations, the Governments of Egypt, Germany, Qatar, and Saudi Arabia, the African Union and the European Union. 32 pledges were made totaling $1.52 billion of the total requirement of $2.57 billion. The protection and life-saving needs of refugees, returnees and others in the Central African Republic, Chad, Egypt, Ethiopia and South Sudan come on top of an already challenging humanitarian and funding situation in these countries.

In addition to a request for more funding, RI is calling for the removal of current bureaucratic impediments (including the need for signing Technical Agreements with Line ministries) and easier facilitation of entry visas for humanitarian personnel in Sudan. RI is also calling for continued support for forward movement of returnees to their areas of origin in South Sudan and Chad.

Finally, RI is passionately appealing to the two conflicting parties to agree to a ceasefire that will allow for humanitarian supplies and personnel to be safely transported and prepositioned before the onset of the upcoming rainy season.

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