



RI staff member providing a health consultation.

# Sudan Regional Crisis

**EMERGENCY SITUATION UPDATE**  
**JULY 28TH, 2023**

## OVERVIEW

The war between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) has now stretched into its fourth month in **SUDAN**. Fighting between the parties continues with no signs of a possible resolution of the conflict or successful ceasefire after at least nine failed attempts.

Approximately 2,800 people have died as result of the conflict, the majority of hospitals are non-functional, and there have been numerous reports of high competition for water, food and basic needs, combined with resource shortages that put vulnerable people at high risk. As a result, over 3.3 million people have been displaced to different parts of the country and to neighboring countries.

Many of the people fleeing Sudan are entering **SOUTH SUDAN** and **CHAD**. UNHCR estimates 148,000 refugees/returnees have already arrived in South Sudan and 320,000 in Chad. Unfortunately, the living conditions at the transit centers and refugee camps in both countries are poor, with limited food and resources and limited access to health facilities.



## UPDATES FROM THE FIELD

### SUDAN

The ongoing conflict has impacted every area of daily life in Sudan. The majority of health facilities are not functioning, and those that are functioning have been targeted by military forces, resulting in over 50 attacks on health facilities since the violence broke out. Scarcity of food, water and cash remains a challenge, communications networks continue to be unstable, acts of criminality are common, and reports of gender-based violence are rising.

With continued fighting, no aid corridors currently existing, it is extremely difficult for humanitarian organizations to safely operate, further impacting the lives of millions of people, especially those that have been displaced from their homes.

In North Darfur, the security situation is tense. One of the key concerns is the continued armed buildup near El-Fasher and in the northern part of the state. At least 18 aid workers have been killed and many more injured since the start of the conflict in Sudan. As a result, the RI security team continues to monitor the security situation in our operational areas and RI staff have remained vigilant regarding their personal safety.

### SOUTH SUDAN

Over 148,000 refugees and returnees have crossed the border into South Sudan, and a further 450,000 are expected to arrive before the end of the year. The bulk of the arrivals will travel through the Upper Nile region, especially the border at Renk. Despite the spirited efforts from the humanitarian sector, assessments in both Renk and Paloch points to huge gaps in services and supplies, owing to high demands.

People awaiting transit in Renk continue to battle with measles, malaria, diarrhea and malnutrition, in part because current service provisions do not meet the WASH and food demands. Between 1-26 July 2023, 47 mortalities were recorded in Renk caused by different diseases. Distress calls for food assistance for hospitalized patients/caregivers were received from Renk Hospital. Reportedly, 30% of the patients admitted at Renk Hospital are from Alagai Camp on the Sudan side

of the border, and most of the cases are reportedly crossing the border without being screened. Activities at the Joda border were suspended on 25 July 2023, following protests by refugees and returnees. After a series of inter-sectorial meetings together with the county authorities, the humanitarian workers resumed work at the border on the 27th July 2023.

There are discussions on extending the transit camp in Renk to accommodate more people as 70% of the returnees in Renk are living out of the transit site, and the period of stay by those at the site is increasing.

In Palouch, the country authorities have announced that they want to relocate the transit site from the airport to a new site with more capacity. The increased pressure on the limited WASH facilities and sanitation both in the transit centers and in the surrounding communities increases the risk for cholera and other diseases.

### CHAD

The influx of over 320,000 refugees from Sudan is already worsening a dire humanitarian situation in Chad. The influx means refugees now outnumber the population of eastern Chad by up to 70%, exceeding the capacity and resources available in the region.

The situation in Adré, where there is an already overflowing temporary camp, remains critical and transfer of refugees to the new Ourang camp in the region is underway. Another site where a new additional camp could be set up soon is being identified, and resettlement continues from border sites to expansion areas of existing and new camps.

Mobilization of partners, particularly in the WASH and health sectors, continues. Nevertheless, the needs remain enormous due to the number of refugees arriving every day.



## 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

RI is working with the State Ministry of Health, Humanitarian Aid Commission, affected communities, and other stakeholders to ensure the timely provision of primary health, nutrition and WASH services to reach the most vulnerable in Sudan.

RI is providing emergency medical services at 27 health facilities in North Darfur and Blue Nile. By the end of the 14th week of the conflict, RI had provided 82,711 health consultations in Sudan including 70,107 outpatient consultations, 10,212 antenatal care consultations and 2,392 measles vaccinations.

RI continues to prioritize revamping of vaccination services that were interrupted in the initial phase of conflict, as well as the provision of lifesaving health and nutrition services. During this period, RI has also prioritized the expansion of services to areas that are underserved and with relatively high demands of services, starting mobile clinics for outreach into remote communities in North Darfur. Limited medical stocks during this period have delayed the initiation of the mobile clinic to Abou Shouk and Al-Salam, but this will begin when the local ministry of health provides supplies delivered from the Federal Central Pharmacy.

Since the crisis began, RI has supported the screening of 7,658 children under the age of five for malnutrition and admitted 1786 for outpatient therapeutic treatment at our network of 30 nutrition centers in North Darfur and Blue Nile. During the past two weeks, RI has received additional seconded staff at facilities in North Darfur and has been able to resume operation of the Stabilization Center for treatment of severe acute malnutrition cases with complications in Zamzam camp.

RI is also working to expand its operations into other areas of Sudan. In Al-Jazira, RI has signed

a Memorandum of Understanding with local authorities and secured approval to establish an office and start program activities. RI has also obtained the necessary approval for operations in Port Sudan and has successfully set up a coordination office, complete with the deployment of international staff.

### SOUTH SUDAN

In Renk, RI and its partner, African Relief and Development Foundation, have continued to provide primary health care services through the clinic established in the transit center. A total of 12,901 consultations have been done since May 2023. In addition to this, 3,233 under-5s and 747 Pregnant and Lactating Women have been screened for malnutrition.

Recruitments for additional staff for the transit camp and Renk hospital under the UNHCR funding in Renk has been completed. A medical doctor, 2 nurses and 2 midwives have been deployed to Renk hospital with UNHCR funding. In addition, 2 nurses and 2 midwives have been recruited and deployed to Renk hospital by RI under the UNICEF-WB health strengthening project. RI received a drug consignment from UNICEF meant for Renk hospital and other health facilities in Renk. This has been a boost and will enable the PHCCs and Renk Hospital to respond to the increasing demand for medical services.



RI staff handing out WASH supplies in Sudan.



## RELIEF INTERNATIONAL'S RESPONSE

RI has been tasked by the health sector to do fit-to-travel screenings in Renk. 1 medical doctor, 1 clinical officer and 1 nurse were assigned to provide the service as and when the services is required by those involved in transportation. RI takes those suffering from illness via ambulance to the nearest airstrip so that they can then be moved to other facilities as necessary.

In Melut, RI continues to provide health and nutrition services, utilising resources from its ongoing UNICEF and WFP supported projects in the area. The nutrition services include screening for under-5s and pregnant and lactating women, as well as treatment of severe and moderate cases of malnutrition. Recently a Maternal, Infant, and a Young Child Nutrition corner was established. RI and MSF also carried out a health and nutrition Assessment in the camp which will be used to determine make health and nutrition activities for the population in transit.

In Maban, RI continues to give health and nutrition services to the recently resettled refugees and asylum seekers in Doro and Batil camps through the existing Primary Health Care centers and Nutrition centers. In addition to nutrition screening and treatment of nutrition among under-5s and Pregnant and Lactating Women, RI conducted measles, vitamin A, and polio supplementary

immunization to 1,096 new refugee children 6 months to 15 years old.

### CHAD

Following meetings between RI and UNHCR, UNHCR has requested RI to provide health, nutrition and WASH intervention in Adré temporary refugee camp. There is also an ongoing arrangement for RI to implement emergency response in a new camp to be established by UNHCR in the same area.

RI requires funding and is currently seeking support from donors. Once funding is secured, RI will target 40,000 Sudanese refugees and 10,000 host community members throughout both the temporary and permanent camps with integrated health, nutrition, and WASH programming.



RI staff assessing the availability of vaccinations in Zam Zam camp.



RI staff member providing vaccination in Sudan.

## 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

In mid-July, RI began conducting an assessment assessing household access to Health, Nutrition and WASH services in North Darfur, Sudan. 160 households were reached in Zamzam (100), Abou Shouk (30) and Alsalam (30), and preliminary results of the assessment will be available from RI in early August.

From engaging with stakeholders, it is clear that protection remains a key priority area, as both displaced and host communities continue to face challenges from gender-based violence at the household level.

### SOUTH SUDAN

Cases of measles have been confirmed in all three counties RI is operating in: Renk, Melut, and Maban. In Renk, although reactive Measles and Polio vaccination has been completed with an overall achievement of 95% and 99% coverage, there is still an increase in mortalities, especially

among new arrivals coming from Alagaya and Amousongor Camps in Sudan.

Although there is a peaceful co-existence between the returnees/refugees and the host communities in these counties, continuous exertion of pressure on the limited resource can be a potential risk for communal conflicts. The continuous stretch on the existing WASH facilities and the start of the rainy season increases the risk of outbreak of water and sanitation-related diseases, especially cholera. Renk referral hospital has been overstretched in terms of space, human resources, food for patients, space, and stock outs.

### CHAD

The primary needs of the affected populations in Chad, which are mainly made up of children, women and the elderly, include shelter, non-food items, health and nutrition supplies, mental health and protection services, food, and WASH facilities. Fuel shortages are becoming more common, and with the commencement of the rainy season there is fear that the road network will be negatively affected, thus the movement of people and goods will be impacted.



RI staff conducting focus group discussion with newly arrived IDPs, El-Fasher.

## RESPONSE COORDINATION AND PLANNING

### SUDAN

RI continues to attend and participate in various thematic working group meetings. During the working group meetings, RI provides key updates regarding advocacy, progress in the implementation of ongoing life-saving activities, security and challenges to information flow, strengthen coordination and avoid any duplications. RI also regularly attends the UNOCHA interagency information-sharing meeting, further contributing to the exchange of crucial insights and updates.

Since the onset of the humanitarian crisis, RI has been working closely with OCHA, UNICEF, the WHO, and other stakeholders, including international and local NGOs, the local administration and line ministries, and in particular, the Ministry of Health and Humanitarian Aid Commission to ensure that all the planned interventions are successfully run.

### SOUTH SUDAN

The coordination of the Sudan Crisis has improved a lot with the deployment of the OCHA official in Renk. RI attends the various sector meetings related to health, security and camp coordination in Renk. In Melut, RI is an active member of

the CHD led coordination forums. RI closely collaborates with UN agencies especially UNHCR, UNICEF, WFP, WHO and UNFPA on various issues related to health and nutrition. RI collaborated with MSF in the assessment of Palouch transit camp and in designing the response plan for the transit camp.

### CHAD

RI is a member of UNHCR coordination group, Health, Nutrition, WASH, FSL, and Protection/GBV clusters, and a member of the Cash Working Group for the east region of Chad. RI has also been participating in cross border coordination meetings led by OCHA.

RI staff in Chad are currently in discussion with UNICEF Chad and UNICEF Sudan to explore the possibility of commencing a cross border response in the east of Chad and west of Sudan. RI staff in Chad and Sudan are also in discussion to explore the possibility of procuring and transporting essential medicines and medical supplies from Chad to support operation in North Darfur.



RI staff members in Sudan

## DONOR MESSAGING

Relief International would like to thank donors for their continued support which enables RI to quickly deploy to where they are most urgently needed.



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At this time, there is an urgent need for donors to boost financial support to humanitarian agencies so they can aid the growing number of displaced people in Sudan and refugees in Chad and South Sudan. In Sudan, RI is actively seeking further funding to widen its operations, maintain access to essential humanitarian and nutrition supplies, and restore health facilities that have been rendered non-operational due to the ongoing crisis. Moreover, in Darfur, the scarcity of nutritional supplies means a more robust advocacy strategy is required to expedite the delivery of UN supplies to Darfur. In South Sudan, RI is looking to increase the resource support beyond transit counties to ensure there are adequate supplies in destination counties. In Sudan, South Sudan and Chad, RI is keen to ensure that Protection/ GBV prevention response and Mental Health and Psychosocial support are not forgotten in this context of scarce resources.

Finally, RI is passionately calling for a ceasefire to facilitate the access of humanitarian supplies and personnel to reach the most vulnerable communities. It is also crucial to consider establishing safe passage corridors before the onset of rains.

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