REGIONAL SITUATION REPORT

SUDAN, SOUTH SUDAN, CHAD

(January - March 2024)



SITUATION OVERVIEW

6,720,136

(IOM 2024

INTERNALLY
DISPLACED PERSONS
IN SUDAN

629,546

(UN-OCHA 2024)

REFUGEES & RETURNEES IN SOUTH SUDAN

570,686

(UNHCR 2024)

REFUGEES & RETURNEES IN CHAD

One year into the conflict in Sudan (April 15, 2023), 17.7 million people face acute food insecurity, with over 2 million seeking refuge in neighboring countries due to escalating inter-communal tensions (Integrated Food Security Phase). Infrastructure destruction hampers aid delivery, while humanitarian organizations face logistical and security hurdles, requiring sustained funding for emergency relief. Women, children, and vulnerable groups urgently need specialized assistance amidst food insecurity and disease outbreaks. Relief International is constantly monitoring the humanitarian needs and ensuring all of our work is relevant and accurate, and the needs for healthcare and nutrition remain paramount. Child malnutrition is prevalent, protection services fall short, and WASH facilities exhibit quality issues disproportionately affecting women. The economic crisis impacts trading and labor, with 70% of women relying on external food support. Financial service access remains limited for 80% of the community. Despite food security challenges, security threats impede humanitarian efforts and assessments.





62,711
FAMILIES
REACHED



438,977 individuals reached



47% FEMALES SUPPORTED



33% CHILDREN SUPPORTED

Relief International provides life-saving aid in **South Sudan**'s Upper Nile region amid an influx of returnees and refugees from Sudan. Children under 5 comprise 17.8% of arrivals, with women at 52.2% and men at 47.8%. On average, 1,580 individuals per day arrived at Joda, requiring urgent health services, WASH facilities, food, shelter, and other essentials. Despite efforts to alleviate congestion, transit centers exceed their capacities, with some individuals forced to reside in open spaces. IOM facilitated the return of 1,500 individuals to Malakal, while UNHCR transported 500 refugees weekly to Maban and JamJam camps. mass MUAC screening in March 2024 by GOAL revealed deteriorating nutrition, with global acute malnutrition rates of 26.6% for under-5 children and 15% for pregnant and lactating women.

Returnees and refugees urgently need shelter, food, health services, and WASH facilities, straining limited resources in the host community.

The eastern region of **Chad** is facing emerging humanitarian needs due to the influx of Sudanese refugees. Between March 24 and 30, 2,820 people, including a significant number of children, crossed the border. In March, UNHCR and partners relocated 5,037 people (1,271 households) from the spontaneous site of Adré to the extended site of Farchana, constituting 45% of new arrivals. Additionally, local authorities allocated land for an extension of the Amnabak developed site in the Wadi Fira province. Despite these efforts, more than half of the new arrivals are still awaiting relocation. Political figures such as UK Minister Andrew Mitchell and US Senator Cory Booker have visited Adré to assess the situation and advocate for increased international support, with the UK announcing a significant increase in aid to Sudan for 2024 and 2025.

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SECTOR ANALYSIS

HEALTH199,799 INDIVIDUALS REACHED

Relief International collaborated with health authorities to deliver healthcare in Sudan. Relief International also conducted capacity-building trainings on Reproductive Health, Mental Health, and Psychosocial Support (MHPSS), the Expanded Program for Immunization (EPI), and Basic Emergency Obstetric and Newborn Care (BEmONC). In South Sudan, Relief International provides integrated health services in Renk and Maban, addressing top morbidities like Acute Respiratory tract infections and Malaria. A decrease in AWD (Acute Watery Diarrhea) cases was noted. A new clinic in Transit Center-2 facilitates pre-travel health screening for refugees heading to Maban and Jamjam.

WASH 135,235 INDIVIDUALS REACHED

On World Water Day, a mass sensitization session on sanitation and hygiene was held in Blue Nile & North Darfur, Sudan. Additionally, conflict-affected communities benefited from hygiene promotion activities, and 4,450 barrels of safe water were provided for drinking and sanitation in the Zam Zam and Abushok communities. Moreover, improved water services were provided to all of the health facilities of Relief International and targeted communities in North Darfur and Blue Nile in Sudan.

NUTRITION101,890 INDIVIDUALS REACHED

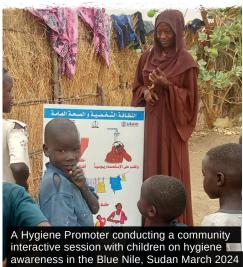
In Sudan, Relief International conducted infant feeding sessions and cooking demonstrations at nutrition centers & mobile clinics. 800 Ready-to-use Supplementary Foods (RUSF) and 450 Ready-to-Use Therapeutic Foods (RUTF) were distributed in North Darfur, Screening conducted for malnutrition that identified 23 Severe Acute Malnutrition cases.

In South Sudan, Children and Pregnant and Lactating Women (PLW) were screened for malnutrition in Renk and Maban. Some children under 5 had severe acute malnutrition (SAM), while others, along with PLW, had Moderate Acute Malnutrition (MAM). New refugee arrivals in Maban received vitamin A supplements.

PROTECTION 1037 INDIVIDUALS REACHED

In Sudan, Relief International conducted sessions on Gender-based Violence (GBV), Mental Health, and Psychosocial Support (MHPSS) in emergencies across North Darfur, Blue Nile, and Sennar states. Cases of Sexual Violence reported in Blue Nile were addressed, and individuals received Mental Health consultations and services for trauma-related injuries. The sessions also focused on child safety from sexual violence, discrimination and the psychological effects of family problems.







Education session at the Renk Transit Center Clinic,

South Sudan - 20th March 2024

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HUMANITARIAN COORDINATION & ADVOCACY

Millions in Sudan and South Sudan face displacement, loss, and infrastructure destruction due to conflict. Relief International seeks donor support for lifesaving aid, including food, shelter, healthcare, and protection. The economic crisis worsens livelihood challenges, especially for women relying on external food support. Millions suffer from acute hunger, requiring immediate action.

In Sudan, conflict has caused displacement and infrastructure destruction, worsening an already dire situation. In South Sudan, overcrowded Transit Centers strain resources, with thousands settling in surrounding areas due to limited capacity. Immediate aid is required to establish clinics, improve WASH and shelter, and enhance resources in affected areas.

Relief International is committed to scaling up efforts but requires additional funding to meet growing needs. Critical aid can reach displaced persons and host communities, focusing on essential sectors like Health, Nutrition, WASH, and Protection. Your generosity can save lives in these devastating crises.

66

"Our priority is keeping people alive in Sudan and South Sudan. We are providing treatment for severe malnutrition as well as trauma care, medicine, vaccines and mental health support. Of course people still need services like antenatal and postnatal care too. Our facilities are being affected by the conflict with shrapnel piercing the walls and ceilings, but we are doing everything we can to continue providing life-saving healthcare."

Mark Atterton Regional Director (Africa-Asia) Relief International



OUR DONORS IN SUDAN, SOUTH SUDAN & CHAD



















MEDIA HIGHLIGHTS



- Inside the Darfur camp where a child dies every two hours | Global development | The Guardianl
- The Red Sea crisis is making it even harder to respond, said Kashif Shafique, the Sudan head of Relief International



"No one is stable around us, and with no jobs, it isn't easy to afford necessities. The uncertainty of war adds to our struggles. In our search for healthcare, we found Relief International Health Facility in El-Fasher, which provides valuable healthcare, treatment, nutrition, and WASH services."

24-year-old Amani from Sudan.

"I was really sick when I arrived at the Renk Transit Clinic (a clinic by Relief International). The clinical officer quickly diagnosed me with Malaria and administered and managed my high fever. After four hours of treatment, I was able to walk out of the clinic with oral medication. Without the help of organizations like Relief International and SSHF, I might not have made it through."

Ajek, a South Sudanese Returnee



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