



RI staff member providing training and supplies in Sudan.

Sudan Regional Crisis

EMERGENCY SITUATION UPDATE
JULY 14TH, 2023

OVERVIEW

Since the full-scale war between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF) began on 15th April 2023, nearly 2,800 people have died across the whole of **SUDAN**. Despite multiple truce agreements, fighting has continued and while Khartoum state remains the epicenter of fighting, the conflict has now expanded to and escalated in other areas, particularly Darfur.

2.5 million people have been displaced within the country and an estimated 645,000 others have fled across Sudan's borders. Areas affected by the conflict, such as Khartoum and Darfur, have reported high competition for water, food and basic needs, combined with resource shortages that put vulnerable people at high risk. As more Sudanese flee for safety every

day, there have also been increasing reports of sexual violence and looting.

Many of the people fleeing Sudan are entering **SOUTH SUDAN** and **CHAD**. UNHCR estimates 120,000 refugees/returnees have already arrived in South Sudan and 192,000 in Chad. The majority are women, children and elderly people with little food and few possessions. Unfortunately, the living conditions at the transit centers and refugee camps in both countries are worsening, straining the ability of the humanitarian community to provide essential assistance. Poor living conditions and limited access to already overwhelmed health and nutrition facilities have led to outbreaks of measles and malaria, with concerns there will be other disease outbreaks moving forward.



RI staff member providing group health consultation to mothers in Sudan

UPDATES FROM THE FIELD

SUDAN

Following the breakdown of recent ceasefire talks, the situation in Khartoum state has become dire with increased fighting between the conflicting parties. As a result, humanitarian actors continue to face massive operational challenges. Relief International's main office in Khartoum has been a no-go area since the conflict began and we have learnt in the last week it has been looted. Whilst frustrating this has not impacted our continued response and commitment to the Sudanese people during this time. In the last few days Relief International's Country Director and a small team have arrived in Port Sudan to determine supply routes and enhance our coordination with the UN agencies and other actors on the ground.

A staggering 66% of hospitals are non-functional due to various factors like shelling, forced evacuations, lack of medical personnel, and power outages. At RI's supported health facilities in El Fasher, the State Ministry of Health seconded staff are reported to be absent from work owing to the unstable security situation. Nutrition supplies for RI's targeted supplementary feeding program in two of its stabilization centers in North Darfur and Blue Nile are yet to be delivered by UNICEF, while staff in health facilities across the country have not received salaries for several months.

Despite these challenges Relief International continues to deliver services at these health facilities and are looking at solutions to deliver much needed medical and nutritional supplies.

Areas affected by the conflict, such as Khartoum and Darfur, have reported high competition for water, food and basic needs, combined with resource shortages. As more Sudanese flee for safety every day, there have also been increasing reports of sexual violence and looting, and in Khartoum incidents of domestic violence have increased as a result of residents being trapped within their houses for prolonged days due to heavy fighting.



RI clinical officer stabilizing a patient at the transit center clinic in Renk, South Sudan



SOUTH SUDAN

Since the conflict began, approximately 120,000 individuals from 25,000 households have crossed the border into Renk, South Sudan. Overall, South Sudanese represent 91% of the arrivals and the rest include Sudanese and third-country nationals including Ethiopians and Eritreans. Half of the people are female, while children aged 0-5 years make up another 20%. Since the beginning of July, an average of 1,750 people are crossing the border every day.

Recently, increased rainfall caused by the oncoming rainy season are worsening the sanitation and living conditions within the transit centers and refugee camps in Renk County. Moreover, numerous cases of measles have been reported in these camps, and there has been a high rate of mortality among the under-5s. To date, about 300 children have been line listed with measles, and 12 deaths have been recorded due to post measles complications.

In Melut, the situation is equally concerning to Renk, as the number of people at the Polach Transit Center has grown to 12,000. These people mostly comprise returnees who have desperately moved from Renk to catch flights from Palouch Airport. The transit center is very congested with poor WASH facilities. The measles outbreak currently seen in Renk has spilled over to Melut. The increase in measles is likely to increase

morbidity and mortalities in the under-5 unless drastic measures are undertaken.

In Maban, a total of 2,375 refugees have been settled in Doro refugee camp. These refugees have mainly come through Renk, Palouch, and the Blue Nile corridor. This influx of new people will increase pressure on the existing health and nutrition facilities, and more resources will be needed as a result. The Doro camp has also recorded positive cases of measles.

CHAD

The 2023 Humanitarian Needs Overview for Chad estimates that over 6.9 million Chadians are in need of humanitarian assistance, more than a third of the country's population. The influx of over 190,000 refugees from Sudan is already worsening a dire humanitarian situation.

The influx of people means refugees now outnumber the population of eastern Chad by up to 70%, exceeding the capacity and resources available in the region. This has created a critical humanitarian situation in the border city of Adré, where health and WASH services are desperately needed at the newly formed refugee camp. Few partners are on the ground providing emergency response, and those that are appear overwhelmed by the huge number of refugees in the province.



EPI vaccinators setting up the immunization room for routine immunizations in South Sudan



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, communities, and other stakeholders to ensure the timely provision of primary health and WASH services that will reach the most vulnerable. RI's interventions primarily focus on health, nutrition, water, sanitation, and hygiene.

RI is providing emergency nutrition services (screening and treatment of malnutrition cases), outpatient consultations, referrals, and outreach services at 27 health facilities and 30 nutrition centers in Blue Nile and North Darfur. Since the onset of the crisis, RI has provided 8,500 health consultations.

Because of increasing cases of diarrhea, RI has scaled up its hygiene promotion activities in North Darfur and Blue Nile where over 4,100 individuals have been reached with safe hygiene practice messages. In the same regions, RI has provided malnutrition services to over 724 children under the age of five.

In Al-Jazira, RI has deployed staff and received approval from local authorities to operate in the area. RI has successfully acquired a guesthouse, office, and warehouse in Al-Jazira, and this acquisition will facilitate RI's ability to increase its geographical footprint in the region.

SOUTH SUDAN

In Renk, RI and its partners have continued to provide primary health care services at the clinic established at the border transit center. The basic health services provided include out-patient consultation, immunization, sexual reproductive health, clinical management of sexual gender based violence, nutrition screening, and referral for treatment of malnutrition. Cumulatively, 10,528 outpatient consultations have been conducted at the clinic since May 2023. Through funding from UNHCR, RI has recently finalized the recruitment of

clinical staff that will allow the transit center clinic to provide health services on a 24 hour basis.

In coordination with the WHO and the County Health Department, RI participated in a reactive measles and polio vaccination campaign that targeted both the host and returnee communities in Renk. A total of 10,614 returnees were vaccinated for measles and polio respectively.

In Melut, through the integrated mobile medical unit stationed at the newly created Palouch transit center, RI and its partners have reached 4,842 people with outpatient consultations. As they have already done in Renk, RI is working with the WHO to develop a plan for a reactive measles and polio vaccination campaign targeting children aged 6 months to 15 years for measles and 0-15 years for polio.

In addition, 979 people have been screened for malnutrition to date in Melut, of which over 140 people have now received treatment for malnutrition.

Relief International continues to provide emergency response with thanks to UNICEF, UNHCR, and both BHA and PRM funding from the US Government.

CHAD

Following consultative meetings between RI and UNHCR, UNHCR has requested that RI provides health, nutrition, and WASH interventions in the newly formed Adré temporary refugee camp.

As a result, over the coming weeks, RI will aim to support 40,000 Sudanese refugees and 10,000 persons from the host community through integrated health, nutrition, and WASH programming.



Children taking part in a hygiene training session 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

At the end of June 2023, RI conducted a Rapid Needs Assessments in Abu Shuok, Tawila and Kutum IDP Camps. Key findings from the rapid assessments indicate increased mental health problems and trauma, shortages of food, shelter, water and other non-food items, protection requirements for women-headed households and children, and specific healthcare support needed for vulnerable people such as pregnant and lactating mothers, children, and persons with disabilities. Moreover, inappropriate and unsafe hygiene practices were also noted in all three camps, as well as a prevalence of malaria, diarrhea, and urinary tract infections in Tawila and Kutum.

SOUTH SUDAN

While returnees/refugees and the host communities are peaceful coexisting currently in Renk, Melut and Maban continuous exertion of pressure on the limited resource is a potential

risk for communal conflicts.

Moreover, the continuous stretch on the existing WASH facilities and the start of the rainy season increases the risk of outbreaks of water and sanitation-related diseases, especially cholera. There is also a gradual rise in the incidence of malaria, and this is expected to continue rising given the poor living conditions and stock-outs of anti-malarial injectables already reported in Renk.

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.

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.



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RESPONSE COORDINATION AND PLANNING

SUDAN

RI has been working closely with HAC, OCHA, UNICEF, the WHO, and other stakeholders, including international and local NGOs, and the local administration and line ministries (in particular, the State Ministry of Health) to ensure that all planned interventions in Sudan run successfully.

RI is currently exploring opportunities for a possible health consortium intervention for IDPs in Wad Madani, Al-Jazira. RI advance project staff are already in Al-Jazira, and continue to take part in the weekly coordination meetings that are held at the State Ministry of Health office.

SOUTH SUDAN

RI continues to work in coordination with the health cluster, State Ministry of Health, and County Health Department to implement its response in South Sudan. As the Health lead partner in Renk, RI is an active member of the county-level cluster and the ongoing health, WASH, and Nutrition sector weekly coordination meetings. Likewise, RI staff in Melut and Maban are working closely with the County Health Departments to respond to the current measles

outbreaks there.

RI is working closely with UNHCR, IOM, and the Relief and Rehabilitation Commission, and is participating in the weekly interagency coordination meetings and the daily update meetings in Renk.

CHAD

RI has been participating in cross-border coordination meetings led by UNOCHA. These meetings are held weekly and are focusing on the provision of the humanitarian response to West Darfur from Chad.

RI is also a member of the UNHCR coordination group. UNHCR coordination meetings are held bi-weekly to discuss the situation of refugees in the East Region of Chad. RI is a member of the Health, Nutrition, WASH, FSL, and Protection/GBV clusters and a member of the Cash Working Group.

RI's team in Chad is in discussion with UNICEF Chad and UNICEF Sudan to explore the possibility of commencing a cross-border response.



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 critical time, more funding is needed for humanitarian agencies to respond to the needs of IDPs in Sudan, refugees and returnees in South Sudan and Chad, as well as the host communities in these countries. Specifically, funding is essential for providing the shelter, WASH, Health, Protection/GBV prevention, and Mental Health and Psychosocial Support (MHPSS) responses currently required in all three countries.

In addition to a general request for more funding, RI is specifically calling for the Sudanese government and IOM to ensure that there is an increase in the forward movement of returnees to their areas of origin to avoid overcrowding. Moreover, RI is also requesting that UNICEF urgently provide nutritional supplies for management of RI's Targeted Supplementary Feeding Program (TSFP) in Sudan.

Finally, RI is passionately appealing for the conflicting parties to agree to open up safe humanitarian corridors so that crucial humanitarian aid can be delivered to those that need it most.

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