SUDAN CRISIS

Situational Analysis

28 February 2024

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### Acronyms

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<th>Acronym</th>
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<tr>
<td>ACLED</td>
<td>The Armed Conflict Location &amp; Event Data Project</td>
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<tr>
<td>AWD</td>
<td>Acute Watery Diarrhea</td>
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<td>CCCM</td>
<td>Camp Coordination and Camp Management</td>
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<td>CH</td>
<td>Cadre Harmonisé</td>
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<td>CP</td>
<td>Child Protection</td>
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<td>CRSV</td>
<td>Conflict Related Sexual Violence</td>
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<td>DRC</td>
<td>Danish Refugee Council</td>
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<td>DTM</td>
<td>Displacement Tracking Matrix</td>
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<td>EmONC</td>
<td>Emergency obstetric and neonatal care</td>
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<td>ERW</td>
<td>Explosive Remnants of War</td>
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<td>FAO</td>
<td>Food and Agriculture Organization</td>
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<td>FCS</td>
<td>Food Consumption Score</td>
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<td>FEWSNET</td>
<td>The Famine Early Warning Systems Network</td>
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<td>GAM</td>
<td>Global Acute Malnutrition</td>
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<td>HeRAMS</td>
<td>Health Resources and Services Availability Monitoring System</td>
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<td>GBV</td>
<td>Gender-based violence</td>
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<td>HNO</td>
<td>Humanitarian Needs Overview</td>
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<td>HRP</td>
<td>Humanitarian Response Plan</td>
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<td>ICG</td>
<td>International Crisis Group</td>
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<td>IDP</td>
<td>Internally Displaced Person</td>
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<td>IED</td>
<td>Improvised Explosive Device</td>
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<td>INGO</td>
<td>International non-governmental organization</td>
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<td>IOM</td>
<td>International Organization for Migration</td>
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<td>IPC</td>
<td>Integrated Food Security Phase Classification</td>
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<td>IRC</td>
<td>International Rescue Committee</td>
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<td>JPA</td>
<td>The Juba Peace Agreement and the Sudanese Transition</td>
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<td>KII</td>
<td>Key Informant Interview</td>
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<td>MHPSS</td>
<td>Mental Health and Psychosocial Support Services</td>
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<td>MSF</td>
<td>Médecins Sans Frontières</td>
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<td>MSNA</td>
<td>Multi-Sectoral Needs Assessment</td>
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<td>NDVI</td>
<td>Normalized Difference Vegetation Index (vegetative health)</td>
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<td>NFI</td>
<td>Non-Food Item</td>
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<td>NGO</td>
<td>Non-Governmental Organization</td>
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<td>NRC</td>
<td>Norwegian Refugee Council</td>
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<td>OCV</td>
<td>Oral cholera vaccines</td>
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<td>OHCHR</td>
<td>Office of the United Nations High Commissioner for Human Rights</td>
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<td>OTP</td>
<td>Outpatient therapeutic feeding programs</td>
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<td>PIN</td>
<td>People in Need</td>
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<td>PSEA</td>
<td>Protection from Sexual Exploitation and Abuse</td>
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<td>PTSD</td>
<td>Post-traumatic Stress Disorder</td>
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<td>PwD</td>
<td>People with Disability</td>
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<td>RSF</td>
<td>Rapid Support Forces</td>
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<td>SAF</td>
<td>Sudanese Armed Forces</td>
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<td>SAM</td>
<td>Severe Acute Malnutrition</td>
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<td>SCI</td>
<td>Save the Children</td>
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<td>SEA</td>
<td>Sexual exploitation and abuse</td>
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<td>SLM-AN</td>
<td>Sudan Liberation Movement - (Abdulwahid Nur)</td>
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<td>SPLMN-AH</td>
<td>Sudan People's Liberation Movement-North (Abdulaziz al Hilu)</td>
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<td>SRH</td>
<td>Sexual and reproductive health</td>
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<td>SSA</td>
<td>Surveillance System for Attacks on Health Care</td>
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<td>TSFP</td>
<td>Targeted Supplementary Feeding Program</td>
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<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<td>UNICEF</td>
<td>United Nations Children's Fund</td>
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<td>UNW</td>
<td>UN Women</td>
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<td>USAID</td>
<td>United States Agency for Development</td>
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<td>UXO</td>
<td>Unexploded ordnance</td>
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<td>OCHA</td>
<td>United Nations Office for the Coordination of Humanitarian Affairs</td>
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<td>WASH</td>
<td>Water, Sanitation and Hygiene</td>
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<td>WFP</td>
<td>World Food Programme</td>
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<td>WHO</td>
<td>World Health Organization</td>
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Introduction

This report covers developments that occurred between December 2023 and January 2024. DFS and iMMAP Inc. follow a rigorous Secondary Data Review (SDR) process where all publicly available data on the humanitarian situation is consolidated into a database using an analytical framework based on the JIAF (see details on the DEEP platform in the Methodology Section). A comprehensive overview of the sources used to produce this report is provided in the Information sources section.

Executive Summary

The conflict in Sudan has left around 25 million people currently in need of humanitarian assistance. According to OCHA, over 6.2 million people have been displaced internally, while 1.8 million crossed the border since April 15, 2023. Far from signs of de-escalation, the conflict has now expanded to areas once considered safe. Following the capture of Wad Madani in December, the RSF currently controls areas in both western and central regions of the country, in addition to four out of five Darfuri states.

Increasing prices of food and fuel are worsening humanitarian needs, while a shrinking economy is causing widespread poverty. On top of this, delivering aid continues to be exceedingly difficult due to the enduring conflict, ongoing insecurity, theft of humanitarian commodities, assaults on humanitarian workers and frontline responders, fuel shortages, and bureaucratic hindrances. Many humanitarian organizations are utilizing cross-border response to provide assistance in Sudan.

Against the backdrop of significantly reduced funding in 2023, the humanitarian sector was able to provide assistance to 5 million people, achieving 27% of the set target for the year. In 2024, the UN is seeking $4.1 billion to support the Sudanese in Sudan ($2.7 billion) and Sudanese refugees and host communities in neighboring countries ($1.4 billion) (Reuters 08/02/2024; OCHA 12/02/2024). In 2023, the response within Sudan was 43% funded, and the response for neighboring countries was 38% funded (OCHA 12/02/2024).
Humanitarian Conditions

**Food Security and Livelihoods**
With 19.3 million people in need of emergency food assistance in Sudan, conflict is making it difficult for humanitarian agencies to reach those most in need. Clashes have also damaged the nation’s industrial and production infrastructures, leading to constrained agricultural yields, and reduced economic activity. This is further exacerbated by widespread looting of markets and supply chain disruptions, further fueling the spiraling of basic food prices. Limited access to food is leading to an increased adoption of negative coping mechanisms. This is even more pronounced among IDPs who do not have the financial means to afford food. Since the beginning of the conflict, 9.1 million people have been reached with food security assistance.

**Nutrition**
Sudan is one of the countries with the highest rate of child malnutrition worldwide. Currently 4.7 million people in the country need nutrition assistance. The worsening security situation is anticipated to intensify food insecurity, adversely affecting the nutritional outlook for 2024. In 2023, nutritional initiatives in Sudan reached half of the targeted children for Severe Acute Malnutrition (SAM) treatment. Recent assessments indicate that these services are primarily hindered by financial constraints, shortages of supplies and personnel, as well as damage to infrastructure. However, UNICEF along with other nutrition actors, have increased the number of mobile clinics to deliver integrated lifesaving health and nutrition services in gathering sites and nearby health facilities.

**Health**
15 million people are currently in need of primary health-care services, while almost 30 million people do not have access to healthcare services. The situation is particularly dire for IDPs, as only 2% of them have undeterred access to health care. This is especially the case as over 70% of healthcare facilities in conflict areas are non-operational. While the conflict primarily affected health facilities in the Khartoum area, its repercussions extended to all states due to the country’s reliance on Khartoum for medical supplies distribution, performing laboratory tests, funding, etc., resulting in a negative impact on the entire health system. Factors contributing to the dysfunctionality of health facilities include a lack of security and shortages in medical supplies and staff. Reproductive health services continue to face constraints primarily due to a shortage of medical supplies, lack of medical personnel, and insufficient training. Despite these challenges, there has been some success in delivering sexual and reproductive health (SRH) services through mobile clinics. Since April 15, Health Cluster partner organizations have been able to reach 1.8 million people across the country providing healthcare services and medicines.

**Protection**
7.7 million people in Sudan need protection assistance. Continuous clashes between SAF and RSF across the country will likely increase protection risk for people. This may result in increased family separation, trafficking and kidnapping during displacement, and increased risk of sexual and gender-based violence. Widespread protection issues are leading to the adoption of negative coping mechanisms such as enrollment in armed groups. Currently, 6.7 million women are at risk of gender-based violence, as they are under both the threat of aggression within the community and the risk of attack outside the community. As of 31 December 2023, protection actors provided support to 201,608 people in need of GBV protection.
Shelter
The conflict has resulted in massive internal displacement making shelter one of the primary concerns in the country. Today, 8.6 million people in Sudan need shelter assistance. Since the outbreak of the conflict, shelter needs have proliferated in the country with the number of people requiring shelter assistance tripling within a year. The need for NFIs has also steadily grown with many IDPs living in camps, public buildings, and open shelters citing an increasing demand for NFI kits. Displaced families in overcrowded shelters are enduring cramped conditions, as they frequently must share rooms with other families. Shelter needs continue to be highest in those states with highest IDPs numbers: South Darfur, River Nile, East Darfur, and Aj Jazirah. The conflict persists in causing extensive damage to private residences, with reports of looting and burning of houses becoming increasingly prevalent in various parts of the country.

WASH
38% of the population requires some form of WASH assistance. Access to WASH services continues to deteriorate mostly due to increased costs, water supply station disruptions, lack of potable water, and the stress in resources due to IDP influx. The solidarity among communities hosting IDPs has played a crucial role in addressing WASH needs. However, this dynamic is now at risk as resources diminish, and the costs associated with accessing essential WASH services continue to rise. An increasing number of individuals are resorting to unsafe water sources. WASH related needs are also growing in severity. Between April and December 2023, 6.5 million people were reached with WASH services. WASH partners achieved response targets mainly in urban areas and through cross border operations but there remain significant barriers to providing WASH services to those in high severity locations.

Education
19 million children are out of school including 75% of IDP children who continue to have no access to education. The escalation of conflict and associated displacement resulted in 1,540 schools being converted to emergency shelters. Only a few schools have reopened, while 19,300 schools across the country remain closed. Education authorities across Sudan are opposing reopening schools due to various unresolved issues including the potential for exacerbating educational disparities if schools in safe areas resume operations. Education partners have established 842 safe learning spaces to mitigate the effects of school closures. UNICEF relaunched its Learning Passport, offering an online and offline program aligned with the national curriculum for grades 1 to 8. The initiative targets children in conflict affected and IDP locations. By October 2023, it had reached 22,300 newly displaced children. However, the education cluster remains severely underfunded with only 15% of the required funding secured in 2023.
### Figure 1: IDPs priority needs, % of households. (Source: DTM monthly report, December 2023)
Spotlight: Conflict and humanitarian access

The conflict in Sudan has now expanded to areas once considered safe. With the takeover of Wad Madani in December, the RSF now also controls portions of the western and central regions of the country.

Since the conflict outbreak, over 13,000 Sudanese have been reportedly killed due to the conflict (ACLED 12/01/2024), though the actual figure may be significantly higher. Between 1 December 2023 and 26 January 2024, ACLED reports 956 political violence events and 1,300 fatalities, most of which concentrated in Khartoum and in Aj Jazirah—following the takeover of Wad Madini (ACLED 12/01/2024). The conflict appears to be escalating and expanding to the heavily contested east, posing further risks of atrocities and mass displacement. Both SAF and RSF have been provided with the resources to continue fighting by external parties. While the United Arab Emirates is reportedly arming the RSF, Egypt, and possibly Iran and others, are providing support to SAF (ICG 09/01/2024). Formal discussions between the conflicting parties have been limited to low-level and technical matters, failing to address the broader issues fueling the conflict (ICG 09/01/2024).
Twenty-five million people in Sudan are currently in need of humanitarian assistance. Rising food and fuel costs are exacerbating humanitarian needs while a reduced economy is contributing to widespread poverty.

Nearly half of the population in Sudan are currently unemployed (CDP 24/01/2024). Unemployment and low purchasing power, coupled with high inflation are driving up humanitarian needs and resulting in widespread poverty. On top of that, as the conflict expands, public and private property, including assets and food stocks are subject to widespread looting. This is accompanied by extensive damage and destruction of critical infrastructure, as well as disruption of trade flows and markets. The takeover of Wad Madani, a significant trade hub particularly following the Omdurman market’s reduced functionality in Khartoum, has caused additional disruptions to both trade flow and market operations (FEWS NET 06/01/2024). High fuel prices have impacted agricultural production and made the transportation of goods challenging (IOM 02/02/2024; IRC 04/01/2024). FEWS NET reports limited activity across Sudan’s market and minimal, or no activity across the trade routes in December 2023 (FEWS NET 09/01/2023). Banks are still closed with no clear indication of when they might reopen, and connectivity remains very limited (UNHCR 08/01/2024). In the first week of February, the
telecommunication and Internet networks of El Sudani and MTN were cut off nationwide, rendering nearly two-thirds of the country's population unreachable (Dabanga Sudan 05/02/2023).

Figure 4: Markets and trade route activities in Sudan for December 2023 (Map Source: FEWS NET)
Delivering aid in Sudan remains extremely challenging due to ongoing conflict, persistent insecurity, looting of humanitarian facilities, attacks on humanitarian workers and front-line responders, fuel shortage, and bureaucratic obstacles.

In the past nine months, conflicting parties attacked 62 health facilities (WHO accessed 05/02/2024) making it difficult for humanitarian organizations to provide medical support where needed. The killing or assaults of over 50 humanitarian workers since the beginning of the conflict (AWSD accessed 05/02/2024) have led international non-governmental organizations (INGOs) to either relocate or scatter their staff along with the population affected by violence, thereby reducing the effectiveness of aid response (ACAPS 24/01/2024).

The void has been partially filled by ERRs, or youth-led emergency response rooms, which have been providing rapid assistance to millions affected by the conflict. These community-led initiatives offer essential services such as food, electricity, water, and protection to those in need. Despite their impactful work, ERRs face challenges such as theft, arrests, and operating in difficult conditions, with volunteers being targeted and killed while carrying out their humanitarian efforts (UN News 03/02/2024).

The continuous disturbance in fuel provision is significantly affecting activities in the White Nile State, causing disruptions in the regular distribution of essential relief items. The shortage of fuel is also impacting the delivery of health services, leading to inadequate fuel for ambulances, generators, and the pre-positioning of medicines (UNHCR 24/01/2024). The conflict has decreased both the quantity and capabilities of commercial transportation firms, leading to increased transport expenses. This has resulted in greater difficulty and higher costs associated with transporting humanitarian supplies (CORE 12/2023).

Humanitarian organizations are employing cross-border strategies to tackle access challenges and deliver aid to those in need in Sudan.

The functionality of Port Sudan, the main entry point for international humanitarian efforts, has been restricted by the necessity of obtaining special permits for humanitarian and evacuation flights. Consequently, this has affected the mobility and rotations of personnel entering and leaving Sudan (HNRP 12/2023). The transportation route from Madani to Kosti, extending to El Obeid and Al Fasher in the west, which serves as the primary pathway for goods and humanitarian aid to Greater Darfur and Greater Kordofan, has experienced additional disruptions. Similarly, routes in the east, stretching from Port Sudan to Al Gedaref and Sennar, have encountered growing disturbances subsequent to the attacks on Aj Jazirah (FEWS NET 06/01/2024). Aid organizations are exploring a new route from South Sudan to deliver assistance to Sudan, as they encounter challenges in reaching many parts of the country (Reuters 15/01/2024).

Emergency Obstetric and Newborn Care (EmONC) services face constraints such as electricity blackouts, water shortages, and a shortage of qualified care providers. UNFPA is addressing these challenges by investing in sustainable clean energy solutions, organizing cross-border operations from Chad to supply the Darfur region, deploying temporary and mobile clinics in areas with limited access to health and protection services, (UNFPA 05/02/2024).

Similarly, following official registration in Chad in November, Relief International has been undertaking cross-border response operations into Sudan. Medicines and medical supplies were brought in N'djamena to be transported to North Darfur, to ensure the continuous delivery of health services in Al Fasher and surrounding areas (Relief International 30/01/2024).
On 18th December 2023, RSF seized control of Wad Madani, the capital of Aj Jazirah. Humanitarian access deteriorated further amid an escalating humanitarian crisis in Aj Jazirah and adjacent areas.

Since the beginning of the conflict, Wad Madani had become a crucial humanitarian hub, accommodating hundreds of thousands of IDPs fleeing Khartoum. However, in mid-December 2023, RSF started moving towards the outskirts of Wad Madani, initiating large scale offensives against SAF (ACLED 12/01/2024). RSF were reported to have looted and destroyed properties, including public, private, and humanitarian assets, throughout Wad Madani. They are also accused of committing acts of violence, including killings and rapes. As RSF advanced towards Aj Jazirah, thousands of people began fleeing to Sennar and White Nile. On 18 December 2023, RSF took control over Aj Jazirah from the army as SAF troops began retreating from Wad Madani (ACLED 12/01/2024). RSF also took control of important towns like Al Manaqil, Rufa’aa, El-Hasheisa, El-Hosh, etc. (Ayin Network 09/01/2024). A state of emergency was announced by the local authorities in Aj Jazirah following the takeover. Curfew was also implemented in Aj Jazirah, Gedaref, Northern, Sennar and White Nile states (ECHO 19/12/2023).

Since the RSF takeover, aid organizations lost their ability to reach Wad Madani (Reuters 15/01/2024), while shops and markets remained closed. Many organizations, including WFP, WHO, and MSF had to suspend their operations in Wad Madani as offices and warehouses were looted by RSF (Sudan War Monitor 11/01/2024; MSF 15/01/2024). MSF evacuated all its staff from Wad Madani (MSF 15/01/2024). Reports indicate that RSF seized six months’ worth of medical supplies in Aj Jazirah, severely restricting medical access for thousands of people (Dabanga Sudan).
To mitigate challenging access conditions, UNFPA mapped out the existing GBV and SRH services in Aj Jazirah and introduced a remote service provision approach for survivors of GBV, assisting approximately 4,000 individuals. Mobile clinics were also deployed facilitating access to healthcare and protection services for 3,796 people (UNFPA 05/02/2024).

After taking over Aj Jazirah, RSF imposed restrictions on people’s movement to Sennar, turning back civilians attempting to flee, thereby cutting off their access to humanitarian aid (ACLED 12/01/2024). Civilians unable to flee Aj Jazirah are grappling with a shortage of essential supplies due to widespread looting of markets and private property. On top of their access to commodities being severely constrained, these civilians face additional protection risks (USAID 03/01/2024). Protection actors have documented arbitrary detentions of civilians, a rise of sexual violence, encompassing the abduction of women and girls, as well as occurrences of conflict-related sexual violence impacting children (USAID 03/01/2024). Fresh clashes also erupted in Sennar state, as anticipated, on 23 December 2023, where most people from Aj Jazirah tried to seek refuge (ACLED 12/01/2024). Reports suggest that some volunteers were arrested in Sinja, a town in Sennar, by SAF military Intelligence while providing service to those displaced from Aj Jazirah (Radio Tamazuj 25/12/2023).

Figure 6: Political Violence occurrences and fatalities in Greater Darfur from 01 December 2023 - 09 February 2024 (Source: ACLED)
The RSF’s dominance of Darfur has sparked violence, displacements, and heightened humanitarian challenges, while clashes in Al Fasher and disruptions in Nyala have deteriorated security situations.

Following the RSF’s takeover of four of Darfur’s five states in November, fears of an imminent RSF assault on Al Fasher, the capital of North Darfur—the remaining state under SAF control—prompted Darfur’s rebel factions and ethnic militias to rally in defense of the city. On 16 December 2023, skirmishes broke out between the SAF and the RSF in Al Fasher, lasting two days. The clashes took place in the Melit Gate area, Abuja, Nevasha IDP Camp, and Abu Shouk IDP Camp, resulting in civilian casualties, injuries and further displacement (ACLED 12/01/2024). People living in displacement camps voiced concerns about worsening security and humanitarian conditions in the aftermath of the SAF and RSF conflict. They are facing heightened uncertainty, a rise in child malnutrition, weakened health in pregnant women, and an increase in malaria and infections due to the suspension of assistance from the World Food Programme (Radio Tamazuj 22/12/2023). Local authorities in North Darfur have been collaborating with humanitarian organizations to deliver essential services, including water, sanitation, hygiene support (WASH), healthcare, and food. Nevertheless, their endeavors are limited due to reported resource shortages in the state and challenges associated with insecure road access (IOM 09/01/2024).

Violence against civilians endured in various Darfur regions, primarily attributed to RSF raids and SAF airstrikes. In Central Darfur, the non-aggression pact between the SLM/A-Abdul Wahid al-Nur faction (SLM/A-AW) and the RSF fell apart when the RSF initiated an attack on civilians. This led to clashes between the two factions on 23 and 24 December, causing numerous casualties (ACLED 12/01/2024). RSF withdrew from Deribat in Sharg Jabal Marrah locality, South Darfur, enabling the SLM/A-AW to peacefully reclaim authority. Since September, the SLM/A-AW has extended its influence on multiple areas in North, South, and Central Darfur states around Jabbal Marrah (ACLED 12/01/2024).

In mid-December, marking the first such incident since the RSF’s control of the region, SAF warplanes conducted airstrikes in Nyala, South Darfur. These attacks aimed at RSF positions inadvertently resulted in substantial civilian casualties (Sudan Tribune 14/12/2023). Later in December 2023 clashes erupted in Nyala between SAF and RSF, resulting in the displacement of around 70 households to the existing Al Salam and Otash IDP camps. Subsequently, on 10 January, 2024, airstrikes resulted in destruction of civilian structures and triggered further displacement from various neighborhoods within the town (Protection Cluster 15/01/2024).

In South Darfur, the conflict has resulted in extensive damage to the Medical Supply Authority’s medical inventory and the World Health Organization’s drug reserves. The lack of medications has forced medical facilities to close. Now, medicines are irregularly transported and sold like regular food items, exposing people to drugs that do not meet safety standards or specifications, the statement detailed (Ayin 31/12/2023). Additionally, in Zalingei, the capital of central Darfur, hospitals are functioning at a capacity of less than 10% of their capacity (Ayin 31/12/2023).
Intense clashes between SAF and RSF in Babanusa, West Kordofan, have led to extensive destruction, casualties, and displacement among the civilians.

On 22 January 2024, the RSF initiated a military campaign with the objective of taking control of the army headquarters in West Kordofan. The clashes intensified as the RSF advanced further into Babanusa, seizing control of a significant portion of the city. They destroyed the main market, the local police headquarters, the railway headquarters, and numerous government facilities. Consequently, SAF conducted a series of intense airstrikes targeting RSF locations in the northern, eastern, and western regions of Babanusa. These intense clashes between led to numerous civilian casualties and displacement of at least 45,000 people (Sudan Tribune 24/01/2024; Sudan Tribune 28/01/2024). Recent reports suggest SAF recruited members of ethnic groups to join its ranks, deploying these fighters to take on RSF in Babanusa (Middle East Eye 05/02/2024).

The persisting conflicts and aerial bombardments underscore the instability in South Kordofan, where the RSF, SPLM-N, and the Sudanese army are engaged in ongoing struggles for dominance (Sudan Tribune 08/01/2024).

The SAF and the SPLA-N under the leadership of Abdulaziz al-Hilu clashed with RSF in Dilling, the second largest city of South Kordofan, in early January. The SPLM-N forces allegedly secured full control of the city, leading to allegations that the army had covertly handed over Dilling to the SPLM-N as part of a secret alliance to oppose
the RSF (Sudan Tribune 08/01/2024). Moreover, air raids carried out by Sudanese army warplanes targeted the Al-Dabaibat area in the Al-Quz locality, situated 56 kilometers north of Dilling. The airstrikes reportedly destroyed a camp and disrupted an RSF vehicle convoy on its way to Dilling (Sudan Tribune 08/01/2024). Soon afterwards, RSF attacked the army’s 54th Infantry Brigade, resulting in further conflict in the Nuba Mountains in Dilling (Sudan War Monitor 10/01/2024).

These conflicts in South Kordofan state have restricted the humanitarian activities of Mercy Corps in the capital city of Kadugli. The city is encircled by armed forces, limiting movement. Additionally, several roads, including the primary route to Dilling, are either closed or inaccessible, compelling aid workers to navigate through numerous perilous checkpoints. Persistent communication challenges, marked by regular mobile phone and internet outages, further contribute to an exceedingly challenging operating environment (Mercy Corps 20/01/2024).

IOM reports severe humanitarian conditions throughout South Kordofan, where much of the population is lacking essential services. IDP households continue to grapple with the challenge of rising food and medical expenses. Ongoing conflict and insecurity are impeding the movement of IDPs, hindering their access to affordable services in remote areas. Additionally, reported setbacks in the agricultural harvest in South Kordofan raise concerns about potential food shortages across the state, further increasing the risks for IDPs who heavily rely on the host community for support (IOM 09/01/2024).

Khartoum:

Figure 8: Political Violence occurrences and fatalities in Khartoum from 01 December 2023 - 09 February 2024 (Source: ACLED)
Intense clashes, strategic maneuvers, and repeated targeting of supply routes characterize the ongoing conflict in Khartoum. These events, coupled with widespread looting and disruptions in essential services, amplify challenges in the affected regions.

Khartoum is subjected to almost daily airstrikes and artillery bombardments. The SAF and RSF continue their struggle over the tri-city region of Khartoum, focusing on securing supply lines. After gaining control of Jebel Awlia and strategic supply routes near the capital, the RSF restored the bridge over the Jebel Awlia dam, which had been damaged in the fighting in late November 2023. However, SAF warplanes targeted the bridge again on 2 December 2023, rendering it nonfunctional. This bridge, crucial for connecting Khartoum and Omdurman, serves as a vital link for the RSF, providing an alternative route to reach Khartoum after the Shambat bridge was bombed in early November 2023. The RSF moved southward from Jebel Awlia to White Nile state with the aim of obstructing the assembly of SAF troops and ensuring control over the bridges in Ad Douiem. This move aimed to establish Ad Douiem as a central route linking the western and eastern banks of the White Nile River. As a result, confrontations expanded to Tendelti and Ad Douiem, along with al-Gitina, which the RSF successfully seized on 21 December 2023 (ACLED 12/01/2024).

Intense clashes broke out in early January 2024 between SAF and RSF in the vicinity of the Corps of Engineers in Omdurman (OCHA 18/01/2024). The SAF has long been striving to lift the blockade around the Corps of Engineers and establish a connection with the Karari military region (Sudan Tribune 09/01/2024), and it appears that they are gaining ground in Omdurman and are close to breaking the siege (Sudan War Monitor 02/04/2024). At the end of January 2024, the SAF also initiated an offensive in Khartoum Bahri, launching attacks from Kadroo Camp (Sudan War Monitor 29/01/2024).

The continued conflict resulted in a large proportion of the districts in Khartoum, Omdurman, and Khartoum North experiencing shortages of food, and disruptions in the supply of drinking water and electricity. Moreover, both SAF and RSF soldiers have been accused of widespread looting of civilian and public properties in the tri-city region of Khartoum (The Guardian 13/01/2023), further reducing people’s ability to meet basic needs. Most hospitals and clinics, whether government-run or private, have stopped their operations. Those that remain open are under the control of the RSF, with the exception of El Nau Hospital in El Sawra, Karari locality, which is under SAF’s control (Radio Dabanga 23/01/2024). However, since early September 2023, Sudanese authorities have been preventing essential surgical supplies from reaching hospitals in regions of Khartoum controlled by the RSF (Humanitarian Outcomes 20/12/2023). Hence, despite hospitals under the RSF remaining open, the availability of lifesaving surgical supplies is limited.

**Displacement**

**Key Figures**

- Between 28 November 2023 and 02 February 2024, the number of IDPs grew by 85,074 to reach a total of 6,144,363 (IOM 30/11/2023, IOM 02/02/2024).
- Between December and January, the largest growth in displacement figures is in Red Sea, where the number of IDPs grew by 111,274 to reach 241,059 (IOM 30/11/2023, IOM 02/02/2024).
- Between 30 November 2023 and 29 January 2024, the number of refugees in neighboring countries grew by 264,092 to a total of 1,552,412. The largest increase occurred in South Sudan where the number of refugees grew by 139,591 to 532,050 and Chad where a 90,310 increase has brought the total to 542,204 (UNHCR 05/02/2024).
Internal displacement overview

Latest developments

The RSF’s seizure of Aj Jazirah state significantly influenced displacement patterns to the south and east of Khartoum, primarily through the displacement and re-displacement of populations within Aj Jazirah. This movement has been directly triggered by the conflict and the reported violations civilians are encountering within the state (OHCHR 20/12/2023).

As of 24 January 2024, 470,212 residents of Aj Jazirah have been displaced, 43% of them within the state, half of whom have identified that they intend to move on to a third location. Simultaneously, 287,416 IDPs from Khartoum have been displaced out of Aj Jazirah to other states (IOM 02/02/2024).

Within Aj Jazirah, IDPs have been displaced out of the state capital of Wad Madani and its surrounding settlements towards more rural localities in the east of the state (IOM 30/11/2023, IOM 23/01/2024).

The expansion of conflict in Aj Jazirah state has led to a marked rise in the influx of Internally Displaced Persons (IDPs) into neighboring states. Between 28 November 2023 and 2 February 2024, IDPs in Al Gedaref have increased by 109,620, in Sennar by 85,728, and in White Nile by 73,704 (IOM 30/11/2023, IOM 06/02/2024).

The swift capture of Wad Madani by the RSF, just a day after the SAF declared it had repelled RSF forces, has altered perceptions of the conflict in Sudan. This event has heightened concerns about the SAF’s capacity to protect territories and towns around Aj Jazirah. (Sudan Tribune 18/12/2023). This has resulted in populations travelling further away from locations that could potentially be the target of an RSF offensive.
Intra-state displacement is increasing as people move further away from RSF-controlled areas. For instance, in White Nile, IDPs continue to favor urban localities in Rabak and Kosti but are now increasingly moving southwards towards the Aj Jabalain locality bordering South Sudan, away from the conflict in the northern end of the state bordering Aj Jazirah. Similarly, between December 2023 and January 2024, the number of IDPs in Blue Nile has grown by 75,407, a 133% increase, as populations fear a possible RSF attack on Sennar (IOM 30/11/2023, IOM 06/02/2024).

The greatest increase in IDP number is in Red Sea state: it is arguably the furthest state from the fighting, it acts as a transit point for those seeking to secure passports or leave the country, the state capital of Port Sudan is the new seat of government, the main command center for the SAF and is in a defensible position thanks to the mountainous terrain surrounding the coast. This has resulted in an increase of 111,274 in the number of IDPs sheltering in the state between 28 November and 18 January, nearly doubling the number to 239,027 (IOM 30/11/2023, IOM 06/02/2024).

From November 2023 to January 2024, conflicts in West and South Kordofan intensified, involving various armed groups and mobilized tribal militias (ACLED 26/01/2024). This escalation led to a notable increase in displacement within both states, marking a new trend for West Kordofan, which had previously remained relatively unaffected by such violence.

Simultaneously the SPLMN-AH incursion into Lagawa town at the east of West Kordofan has driven displacements from there (IOM 26/10/2023). By 18 January 2024, 21,204 individuals had been displaced within the state as a result of the expansion of conflict, bringing the total number of IDPs in the state up to 100,998, a trend
that is likely to continue as a result of the escalating clashes between the SAF and the RSF (IOM 30/11/2023, IOM 23/01/2024).

In South Kordofan, the escalation of fighting between the SAF, RSF and the SPLMN-AH features an ethnic dimension of the conflict (Sudan Tribune 07/01/2024). These ethnic tensions are influencing displacement trends within the state, with Arab residents moving towards the Ar Reif Ash Shargi locality for fear of being targeted by SPLMN-AH forces around Kadugli town, while those of non-Arab ethnicities remain displaced within Kadugli town sheltering amongst the host community or in schools (IOM 29/12/2023). Alongside the recent clashes around Habila and Dilling, the displacement within the state has rapidly expanded, with 95% of the 23,402 newly displaced individuals between 28 November 2023 and 18 January 2024 displaced from within the state bringing the total number of IDPs to 101,971 (IOM 30/11/2023, IOM 23/01/2024, Sudan Tribune 07/01/2024, Radio Dabanga 28/01/2024).

Unlike from Central and West Darfur, where violence has decreased since RSF takeovers, South Darfur continues to experience intermittent communal violence, indiscriminate aerial bombardment of Nyala and widespread insecurity. These factors continues to drive displacement within the state as well as towards neighboring Darfuri states (Radio Dabanga 12/01/2023, Radio Dabanga 16/01/2023).

As of 18 January 2024, South Darfur hosts 700,578 IDPs, 95% of which displaced from within the state. The majority of IDPs displaced out of South Darfur are seeking refuge in East Darfur, with now South Darfuri populations accounting for 32% of IDPs in East Darfur, making them the second largest population after those displaced from Khartoum (IOM 30/11/2023, IOM 23/01/2024).

Similarly, Central and West Darfur have seen significant reduction in the violence following RSF victories, leading to a reduction in the rate of displacement from within the states even as they host growing numbers of IDPs from South Darfur. The exception to the trend is the occasional clashes between the SLM-AW and Arab militias in the proximity of the SLM-AWs stronghold in the Jebel Marrah mountain (IOM 31/12/2023, IOM 23/01/2024). As of 18 January 2024, the majority of IDPs in both states remain displaced from within the state, but 45% and 82% of those displaced in December and January in Central and West Darfur are South Darfuri (IOM 30/11/2023, IOM 23/01/2024).

Recurrent conflict between the SAF and the RSF, alongside activity by communal militias continues to drive displacement in North Darfur and North Kordofan (Sudan Tribune 01/02/2024, IOM 02/02/2024, UNHCR 13/01/2024, ACLED 26/01/2024).

North Kordofan continues to see an increase of displacement within the state as well as influxes of IDPs from Khartoum, who represent 85% of the total IDP population (IOM 30/11/2023, IOM 23/01/2024).

In North Darfur, the bulk of the IDP population and new displacements remain within the state as recurrent clashes involving the SAF, RSF and Darfuri rebel groups continue intermittently across the state. As of 18 January 2024, 86% of the 459,633 IDPs are displaced from within the state (IOM 30/11/2023, IOM 23/01/2024).
Refugee flows into Chad continue to grow since the fall of the SAF garrison in Ardamata in November, amid reports of ethnically motivated violence and killings in West Darfur (HRW 26/11/2023).

Despite movement restrictions and a recent reduction of violence, the number of refugees fleeing into Chad continued to grow in December and January, with UNHCR reporting 90,310 new arrivals as of 29 January 2024, bringing the total number to over 530,000 (UNHCR 05/02/2024, UNHCR 18/01/2024, ACLED 26/01/2024).

The majority of refugees are entering Chad's Ouaddai province through the Adré/Adikong and Koufroun border entry points from West Darfur. The rest are arriving in Wadi Fira and Sila provinces from North and South Darfur, respectively, with a significant number of them being children and women from Khartoum, Nyala, Al Fasher, and Zalingei (UNHCR 02/02/2024). The situations in the camp remain critical as the number of refugees grows alongside their needs amongst limited funding (RI 01/02/2024). With refugees developing crisis strategies in order to access markets, facing severe deprivation in terms of shelter, food and access to water (UNHCR 02/02/2024, FEWSNET 01/2024).

Intermittent communal violence, indiscriminate aerial bombardment of Nyala and the broad insecurity in the state continues to drive displacement towards the Central African Republic (Radio Dabanga 12/01/2023, Radio Dabanga 16/01/2023, UNHCR 06/02/2024).

As the insecurity in South Darfur extends, growing numbers of refugees are fleeing to the Central African Republic. Many are moving onwards from Um Dafoug crossing point towards Birao due to the lack of services and insecurity at the border (UNHCR 02/02/2024).

The fall of Wad Madani in December has raised concerns about the SAF's ability to defend territories under its control, leading to increased movements of refugees into South Sudan, Ethiopia and Egypt, as well as growing irregular movements that are creating protection voids (Sudan Tribune 18/12/2023, MMC 05/02/2024).

Even before the fall of Wad Madani, feelings of insecurity by displaced populations were rampant, findings indicated that 74% of those assessed in Al Gedaref (47 respondents) and 96% of those assessed in Port Sudan (25 respondents) did not feel safe in those locations, a trend that has likely accelerated with the events in Aj Jazirah (MMC 05/02/2024, Sudan Tribune 18/12/2023).

With the opening of the crossing on January 27 and improved security in Gondar, we are now seeing increased movement into Ethiopia from Al Gedaref state that borders Aj Jazirah (UNHCR 31/01/2024, UNHCR 05/02/2024). Refugees are also displacing from the conflict affected Kurmuk locality into Ethiopia's Benishangul-Gumuz region and are reporting significant protection concerns. Those who enter the country via Addis Ababa have no access to asylum or other services, raising the risk of arbitrary detention and forcible relocation (UNHCR 02/02/2024, MMC 05/02/2024). An assessment by the Mixed Migration Center done between August and October 2023 found
that 78% of respondents in Addis Ababa intended to stay despite challenges in accessing housing, food and cash, with 96% considering the city a place of safety (MMC 05/02/2024).

Figure 14: Monthly New Refugee Arrivals (Source: UNHCR Sudan Situation Dashboard)

Changes to visa requirements and entry procedures in July have led to a stabilization in the monthly number of Sudanese reaching Egypt through official channels (Reuters 22/07/2023, UNHCR 06/09/2023 UNHCR 05/02/2024). This has had the effect of increasing the number of Sudanese crossing into Egypt through irregular routes, particularly as living conditions worsen in Wadi Halfa and the nearby Argeen crossing, combined with the growing feelings of insecurity in SAF controlled areas after the recent RSF victories (Radio Dabanga 16/01/2024).

Figure 15: Monthly New Refugee Arrivals (Source: UNHCR Sudan Situation Dashboard)

Flows of refugees and returnees to South Sudan has remained consistently high month to month, spiking in December and January (UNHCR 05/02/2024). Much of this is due to a substantial increase in the numbers of Sudanese refugees crossing into South Sudan from White Nile state towards Renk in South Sudan (UNHCR 25/01/2024). As the conflict expands into White Nile State, this trend will likely continue to accelerate despite reported challenges due to distance between Maban refugee camps and the border, attempts at family reunification, and concerns about insufficient access to health, food and basic assistance in South Sudan (UNHCR 02/02/2024). An assessment by the Mixed Migration Center done between August and October 2023 found that 91% of returnees intended to remain in South Sudan, while most Sudanese and other nationalities intended to remain for the next 3 months 19% intended to move to a third country and 29% of third nationalities intended to return to their home country, highlighting the onward movement of displaced and vulnerable populations considering challenges they are facing in accessing cash, housing and healthcare in South Sudan (MMC 05/02/2024).
Humanitarian Conditions

Food Security and Livelihoods

Key Figures

- 19.3 million people in need of food and livelihoods (HNRP 2024)
- 17.7 million people at high risk of acute food insecurity in February 2024 (IPC 12/12/2023)
- 12.8 million people are classified as facing crisis level food insecurity (IPC phase 3) (IPC 12/12/2023)
- 4.9 million people are classified as facing emergency level food insecurity (IPC phase 4) (IPC 12/12/2023)
- Food is the main need for 89% of IDP households in Sudan, while the lack of financial means is the top barrier when accessing markets (IOM 02/02/2024)
- As of December 2023, 9 million people have benefited from emergency food aid and livelihood support, including 2.93 million who have received emergency food aid and 5.72 million who were provided with agricultural and livelihood support. (OCHA 12/02/2024)

Latest developments

Clashes between SAF and RSF are hindering the proper distribution of food aid, disrupting market supplies in the regions of Aj Jazirah, Khartoum, Kordofan and Darfur, increasing prices and exacerbating the food insecurity of the population.

In December, provision of food assistance in the cities of Khartoum and Nyala was hampered by clashes between RSF and SAF, and RSF blockades, combined by large-scale displacements. Roads leading to local markets have been cut off or restricted by checkpoints, hindering supplies to markets. Additionally, food distribution in Aj Jazirah state was interrupted by the looting of stocks of food aid (around 2,500 metric tons of sorghum, pulses, vegetable oil, and nutrition supplements). Markets and banks were also looted and destroyed by armed groups in clashes between SAF and RSF in Wad Madani.

In January, during the harvest period, clashes in Sennar State, White Nile State and South Kordofan ~ important regions for agricultural production ~ severely affected harvests and agricultural production of sorghum and millet, posing a threat to national food availability. In East Darfur, farmers reported being unable to transport and trade their products due to the destruction of many market systems (IOM 05/12/2023, NRC 22/12/2023, PC 26/12/2023, WFP 28/12/2023, FEWSNET 06/01/2024, OCHA 08/01/2024).

The widespread looting of markets, hindering food flows, is considerably reducing the means of subsistence of populations, suffering from shortages of food, fuel, and medicines, leading to scarcity of basic food products. Fighting has triggered movements of food stocks and rushed sales to avoid losses from looting. Therefore, the average food availability consumption is expected to decrease compared to the previous year. Moreover, looting also has a negative impact on food prices, leading to financial losses and rising staple food prices. Transport costs have also risen along with fuel prices, exacerbating the difficulties of accessing basic necessities and essentials (FEWSNET 12/2023, FAO, IOM 05/12/2023, OCHA 08/01/2024, FEWSNET 01/02/2024).

In this context, food security remains a priority concern as destruction increases the risk of famine and food insecurity for the population. Clashes are putting 1.5 million people at risk of acute food insecurity in Aj Jazirah State over the coming months. Households in Omdurman (Khartoum) and El Geneina (West Darfur) are likely to reach emergency food security status (IPC phase 5) over the coming lean season. Moreover, difficulties in accessing food are increasing people’s dependence on humanitarian food aid. Consequently, limited access to humanitarian aid is contributing to the adoption of negative coping mechanisms, exacerbating the vulnerability of populations in need. As reported by FEWSNET, ensuring safe passage for humanitarian aid flows and trade is crucial to food insecure households during the lean season of 2024 (FEWSNET 12/2023, FAO, IOM 05/12/2023, IPC
Overall Situation

Since the end of 2022, the population in need of food and livelihoods assistance soared from 11.7 to 19.3 million amidst conflict, worsening food insecurity and a substantial aid reach gap. Escalating prices, agricultural production losses and the destruction of infrastructure are preventing the population from accessing food, and the number of states in IPC phase 4 is likely to increase during 2024.

Between the publication of the HNO 2023 and the publication of the HNRP 2024, the number of people requiring food and livelihood assistance increased from 11.7 to 19.3 million. Although only 49% of the targeted population received aid in 2023—a figure reflecting substantial gaps in assistance—humanitarian response coverage in 2024 may decrease in a context of intensification of the ongoing conflict and substantial constraints on humanitarian aid distribution (OCHA 2023, HNO 2023, HNRP 2024).

Clashes have damaged the country's industrial and production base, resulting in limited agricultural outputs and economic activity. In regions affected by the conflict, damages to infrastructure and the road network have led to supply disruptions, weakening the national economy, which is highly agriculture-dependent, leading to a significant aggravation of the population's food security. 42% of the population is experiencing a high level of acute food insecurity (IPC phase 3+), and 4.9 million people are suffering from urgent food insecurity (IPC phase 4).

The populations most affected by food insecurity live in states affected by the conflict between SAF and RSF and large-scale population displacements, notably Greater Darfur, Greater Kordofan and Khartoum (areas of Khartoum, Bahri and Omdurman). Food insecurity is exacerbated by variations in the price of basic food products affecting the cost of the local food basket. In December 2023, the national average cost of the food basket rose by 88% compared to the average cost pre-conflict and by 69% compared to December 2022. This significant increase in the national average cost of the food basket is likely to push many people into higher levels of food insecurity. Consequently, the number of states classified as urgently food insecure (IPC phase 4) could increase as a result of the rise in the price of basic food staples (IPC 12/12/2023, IOM 15/12/2023, HRP 21/12/2023, NRC 22/12/2023, OCHA 16/01/2024, WFP 17/01/2024, OCHA 21/01/2024, FEWSNET 31/01/2024, FEWSNET 01/02/2024, OCHA 04/02/2024).

Internally displaced people in Sudan are resorting to harmful coping mechanisms amidst a food crisis. Nine out of ten displaced households indicated food as their main need, while escalating prices and the lack of livelihood opportunities within their displacement situation prevents them from affording food at markets.
IDPs, most of them fleeing the clashes, are in an extremely precarious situation and have very limited means to meet their basic needs including food. Consequently, local markets are less frequented due to general insecurity and the precarious purchasing power of households leading to a diminution of the demand for basic products. In Darfurian states, widespread insecurity hinders IDPs from seeking employment to earn money. Thus, IDP households, who have lost their means of subsistence, report adopting negative coping mechanisms to meet their basic needs: reducing the number of meals eaten per day, taking lower paid jobs, accumulating debts or arranging marriages for their children. Latest Monthly DTM indicates that food remains as the main need for 89% IDP households all over the country, while identifying the lack of financial resources as the main barrier to food, with more than 95% of the assessed households indicating their inability to access food due to the lack of money. In Khartoum the lack of safe access to markets represents a real barrier for IDPs, as one in three displaced households states not being able to access food due to insecurity (FAO 05/12/2023, IPC 2/12/2023, UNHCR 19/12/2023, OCHA 27/12/2023, FEWSNET 03/01/2024, FEWSNET 06/01/2024, WFP 17/01/2024, IOM 02/02/2024).

![Figure 16: Percentage of IDP households setting food security as a priority need, as reported by DTM KIs](Source: DTM Monthly Displacement Overviews)

**Nutrition**

**Key Figures**

- As of December 2023, over 4.7 million children and women are in need of nutrition assistance, positioning the country among the highest globally for rates of child malnutrition (UNICEF accessed 31/01/2024).
- About 3.5 million children already are acutely malnourished, of whom 700,000 suffer from the most critical form of malnutrition – severe acute malnutrition. Without treatment, they are at significant risk of dying (OCHA 21/01/2024).
- Stabilization services for severe acute malnutrition are only available in 17% of more than 500 health facilities monitored by the Health Cluster (Health Cluster and WHO 04/02/2024).
- In December, over 66,400 caregivers were reached at facility and community levels with Infant and Young Child Feeding (IYCF) counseling and support in Kassala state (UNICEF 01/02/2024)
Latest Development

In December, Aj Jazirah, previously seen as a safe refuge, experienced clashes that disrupted nutrition services. This situation particularly endangered children under five, heightening the risks of food shortages and anemia due to halted services and the destruction of food infrastructure.

Clashes in December in Wad Madani, Aj Jazirah state, disrupted essential nutrition services, leading to the suspension of most operations in the state due to safety concerns. This situation jeopardizes nutrition support delivery, particularly affecting children under five with increased risks of food shortages and anemia (USAID 17/01/2024, CARE 22/01/2024). Aj Jazirah, previously a safe haven and strategic humanitarian hub, is now experiencing the destruction of vital food production infrastructure and looting of food storage facilities and markets, exacerbating the nutritional vulnerabilities of those displaced, many of whom are facing secondary displacement (UNICEF 31/01/2024).

Despite the deteriorating security situation, between December 2023 and January 2024, UNICEF and other partners enhanced Infant and Young Child Feeding (IYCF) counseling and support, reaching over 66,400 caregivers at facility and community levels across Sudan (UNICEF 01/02/2024). The IYCF services, included the diet diversity training for thirteen mother support groups and the establishment of eight breastfeeding corners in Kassala state where pregnant women, mothers, and other caregivers of infants and young children can access quality support on infant feeding and care.

Overall situation

As a result of ongoing conflict, reduced food security, compromised health and WASH services, and continued displacement, food insecurity is expected to further exacerbate. The nutrition outlook for 2024 is negative, as planned assistance targets less than half of the population in need, many of them being children under five.

The nutritional situation in Sudan is extremely worrying as the country remains among the top four countries with the highest prevalence of Global Acute Malnutrition (GAM), with an estimated 13.6% of its population (OCHA 21/12/2023). The deteriorating security situation is expected to further exacerbate food insecurity, negatively impacting the nutrition outlook for 2024. The 2024 People in Need (PIN) is projected to rise by 10% and 30% in non-IDP and frontline localities, respectively, reaching over 4.7 million, the highest estimate in Sudan's history. However, the targeted population for nutrition assistance remains at 1.9 million and only 40% of the people in need, significantly lower than the previous plan, which aimed at aiding 2.5 million individuals (OCHA 21/12/2023). However, humanitarian organizations continue to appeal for more funding to meet the growing needs of children, women and families (OCHA 04/02/2024).

In 2023, nutrition response in Sudan reached only 50% of targeted children for Severe Acute Malnutrition (SAM) treatment, and recent evaluations indicate that these services are mainly hampered by financial constraints, shortages of supplies and personnel, as well as infrastructure damage.

Since April 2023, interventions in the nutrition sector in Sudan have faced severe limitations, and UNICEF's yearly report indicated that 313,400 children were admitted for severe acute malnutrition (SAM) in 2023, that is, 50% of their targeted population for last year. The HeRAMS 23 report and a recent assessment by Catholic Relief Services identify a significant lack of medical supplies, staff shortages, financial constraints, and damaged infrastructure as the main issues that severely restrict the provision of Severe acute malnutrition stabilization services, available in only 17% of health facilities (UNICEF 28/12/2023, CRS 30/01/2024, Health Cluster and WHO 04/02/2024). The internally displaced population remains the most affected in terms of nutritional needs and faces the greatest difficulties in accessing such services. This is exemplified by two recent assessments by REACH in hard-to-reach areas of South and Central Darfur, where the evaluated population reported having no
access to nutrition services whatsoever (REACH 27/12/2023, REACH 27/12/2023b). This particularly affects vulnerable populations such as children under 5 and pregnant and lactating women, the primary recipients of these services. However, the latest Monthly DTM indicates that 30% of the assessed IDP households in the states of North Darfur, South Darfur, and Red Sea indicated nutrition services as one of their top priority needs, which suggests that the nutrition situation could be extremely dire (IOM 02/02/2024).

Nevertheless, amid the growing nutritional needs, UNICEF and some partners have increased the number of mobile clinics and ensuring availability of nutrition supplies to deliver integrated lifesaving health and nutrition services in gathering sites and nearby health facilities (UNICEF 01/02/2024).

Health

Key Figures

- The 2024 HRP estimated that almost 15 million Sudanese are in need of essential life-saving primary health care (OCHA 21/12/2023).
- As of 31 January 2024, there are 10,496 reported cholera cases and 292 fatalities across 11 states (FMoH and WHO accessed 05/02/2024).
- An oral vaccination campaign in high-risk areas of Al Gedaref and Aj Jazirah reached over 2.2 million people (OCHA 04/02/2024).
- Two-thirds of Sudan’s population lack access to healthcare services and more than 70% healthcare facilities in conflict areas are non-functional (OCHA 01/02/2024, UNHRC 05/02/2024, OCHA and UNHCR 07/02/2024).
- In late January, UNFPA estimated that there are nearly 170,000 pregnant displaced women in Sudan who urgently need reproductive health services (UNFPA 23/01/2024).
- Between 15 April 2023 and 31 December 2023, Health cluster partner organizations reached 1.8 million people across Sudan providing healthcare services and medicines (OCHA 12/02/2024).

Latest developments

While there is a general decrease in new cases, Sudan is still grappling with an ongoing cholera outbreak, with over 10,000 reported cases and 292 deaths across 11 states. Since 26 September 2023, Sudan has been grappling with a cholera outbreak originating in Gedaref, escalating to 10,496 cases and 292 fatalities across 11 states by 31 January 2024. Despite a decreasing trend in new cases since December, the outbreak’s extension to River Nile and Northern states indicates persisting vulnerabilities in public health surveillance and response mechanisms (FMoH and WHO accessed 05/02/2024).

The coordinated response, led by the Federal Ministry of Health (FMoH) with support from WHO, UNICEF, and other partners, has seen significant strides, including the near completion of an oral cholera vaccination campaign in high-risk areas of Gedaref and Aj Jazirah. However, the planned extension of this campaign to cover 5.5 million people in 14 cholera-affected localities remains in the pipeline (OCHA 19/10/2023, OCHA 02/11/2023, OCHA 14/11/2023, OCHA 04/12/2023, OCHA 07/01/2024, USAID 31/01/2024, OCHA 04/02/2024).
Overall Situation

Heavily damaged by the conflict and due its centralized nature relying on the capital Khartoum, Sudan’s health system is collapsing, leaving millions of Sudanese without essential life-saving primary health care. Between 15 April and 31 December, partner organizations were able to provide healthcare services and medicines to 1.8 million people which covers only 12% of the people in need.

The 2024 HNRP estimated that there are almost 15 million Sudanese in need of essential life-saving primary health care amidst considerable funding shortages (OCHA 21/12/2023). Provision of health has been a long standing issue with the 2023 HNO rating the health sector as one of the top three sectors with the highest number of people in need of humanitarian assistance (10.1 million) (OCHA 07/11/2022). Although fighting impacted mainly...
on the Khartoum area, the revised HRP estimated that due to the centralized health system in the country and its reliance on the capital Khartoum, all states were negatively affected (OCHA 17/05/2023).

More than ten months have passed since the eruption of the conflict and the already fragile health system in the country is collapsing. Two-thirds of Sudan's population lack access to healthcare services and more than 70% healthcare facilities in conflict areas are non-functional (OCHA 01/02/2024, UNHCR 05/02/2024, OCHA and UNHCR 07/02/2024). According to the HeRAMS report the main causes of dysfunctionality of health facilities (covered by the assessment) are lack of security, and a shortage of medical supply and staff (Health Cluster and WHO 04/02/2024). In terms of access, the main reasons for inaccessibility of health facilities are the security situation followed by physical barriers (Health Cluster and WHO 04/02/2024). However, despite challenges, between 15 April 2023 and 31 December 2023, health partners reached around 1.8 million people across Sudan providing healthcare services and medicines (OCHA 12/02/2024).

The vast majority of IDPs in Sudan face challenges accessing healthcare services, mainly due to low quality of health services, lack of financial means, health services being far away from current location and insecurity issues, especially concerning IDPs in conflict areas.

Health is one of the most pressing needs for IDPs in Sudan, following food and NFI. Recent data provided by IOM indicates that the number of IDPs needing healthcare assistance is growing, and 78% of the IDP households assessed in the last DTM indicated health as one of their primary needs (IOM 06/10/2023, IOM 09/01/2024, IOM 02/02/2024). Moreover, 24% of the IDPs in Sudan have no access at all to health services and only 2% of them have access to healthcare without any complications. The main problems regarding health services for IDPs include financial barriers and limited quality. High demand and limited availability of services have escalated costs, while distance from health facilities and insecurity issues further restrict access (IOM 02/02/2024).

In the conflict-stricken regions of Darfur and Kordofan, the situation is far worse with the vast majority of IDPs find themselves without healthcare access, as highlighted by the latest DTM (IOM 06/10/2023, IOM 09/01/2024, IOM 02/02/2024). In contrast, in Sennar State, IDPs in proximity to gathering sites reported relatively easy access to health services in December 2023, according to a Rapid Needs Assessment by NRC (NRC 20/12/2023). Yet, in Gedaref, a similar assessment from the same period revealed that 93% of IDPs could not access healthcare, primarily due to resource deficiencies in medical facilities. Meanwhile, an assessment in Kassala showed that over half of the IDP population lacks access to health services, in stark contrast to host communities. Financial constraints, medical supply shortages, low service quality, and logistical challenges were identified as the main obstacles for IDPs seeking healthcare (NRC 22/12/2023, OCHA 27/12/2023).

Reproductive health services remain limited mainly due to lack of medical supplies, shortage of medical personnel and insufficient training although there has been some success in providing SRH services through mobile clinics.

Even before April 2023, reproductive health services were insufficient due to low coverage and quality (OCHA 07/11/2022). The eruption of the conflict had a dramatic impact on the situation and greatly reduced the access of women and girls to essential healthcare resulting in thousands of pregnant women without necessary reproductive health services across the country (OCHA 17/05/2023, ACAPS 24/01/2024). In late January, UNFPA estimated that there are nearly 170,000 pregnant displaced women in Sudan who urgently need reproductive health services (UNFPA 23/01/2024). However, lack of humanitarian access due to the ongoing conflict, especially in Darfur, Kordofan, and Khartoum states, leaves many women and girls in some states without reproductive health services (Health Cluster and WHO 16/01/2024). According to the Sudan Health Cluster HeRAMS 2023 Annual Report published on February 2024, out of the 34 health facilities without reproductive services that were evaluated, the main reasons for the unavailability of reproductive health services were lack of medical supplies, and insufficient medical staff and training (Health Cluster and WHO 04/02/2024). Even where services are available, women and girls are extremely challenged by the high healthcare costs of services such as...
caesarean deliveries, which in East Darfur are estimated to cost USD 330, an unaffordable amount for most of the population, thus risking the lives of both mothers and babies given delivery complications (ACAPS 24/01/2024). However, there has been some success in providing SRH services with 30 temporary clinics providing integrated SRH and GBV services in areas of Darfur, the Nile states, as well as Kassala (UNFPA 05/02/2024).

**Protection**

**Key Figures**

- According to the Protection Cluster estimations, 4.2 million people are facing protection risks (Protection Cluster 22/01/2024).
- Between May 2023 and December 2023, people in need of protection have risen from 4.1 to 7.7 million, number of children in need of child protection have risen from 3.8 million to 6.2 million, and number of people in need of GBV support has risen from 3.1 million to 6.7 million (HNO 2023, HNRP 2024).
- Between April and December 2023, 201,608 people were reached by GBV humanitarian actors (UNFPA 05/02/2024, OCHA 12/02/2024).

**Latest developments**

There are concerns that clashes between SAF and RSF are now putting civilians at risk in what was considered the relatively safe state of Sennar. This is likely to increase the protection risks faced by the population - especially vulnerable persons - as the conflict spreads in the region.

In December 2023, after clashes erupted between SAF and RSF in the state of Sennar and the RSF incursion into Jebel Muyar, the Sennar state government called for massive popular armed resistance against the RSF. These measures enhance the spread of violence while increasing the risk of forced recruitment into armed groups. (Sudan War Monitor 22/12/2023, Radio Tamazuj 25/12/2023, OCHA 08/01/2024, ACLED 12/01/2024, ACLED 17/01/2024, Sudan War Monitor 19/01/2024, Sudan War Monitor 23/01/2024, iMMAP Inc. assessed 01/02/2024).

The state of Sennar is hosting displaced people fleeing the clashes from the worst-affected regions. Displaced people living in Sennar state have not, to date, reported any major protection or security issues. (In December 2023, protection concerns accounted for only 3% of the priority needs of IDPs living in Sennar state and 48% of IDPs in that state reported that they faced no security difficulties in their place of settlement) (NRC 20/12/2023, IOM 28/12/2023, NRC 28/01/2024).

Continued clashes between the SAF and RSF are anticipated to lead to civilian casualties and the destruction of civilian infrastructure. Consequently, the ongoing conflict may compel displaced persons and host communities to flee the state, risking family separation, trafficking, or kidnapping during displacement. Moreover, women and girls would face an increased risk of incidents of gender-based violence, including sexual abuse and exploitation (NRC 28/01/2024, IOM 02/02/2024).

Ongoing clashes between SAF and RSF in Khartoum, in Kordofan and in North Darfur, in particular in Al Fasher, heighten the exposure of the affected population to high and severe protection needs.

On 9 January 2024, clashes between SAF and RSF at the Melit checkpoint in Al Fasher town displaced 50 households. On 17 January, further clashes between SAF and RSF were reported in the locality of Kutum. Later in January, violent clashes between SAF and RSF were reported following an RSF offensive on the town of Al Fasher. As a result, several buildings and civilian property were damaged and human casualties were reported. Clashes reportedly erupted near the Abu Shouk, Al-Salam and Abuja IDP camps, exacerbating the already disastrous humanitarian situation in the region. Al Fasher is considered to be an acute hotspot affected by armed attacks,
putting the protection of around 3 million people at risk, particularly in the urban area of Al Fasher and the Abu Shouk and El Salam camps (ACLED 17/01/2024, Protection Cluster 22/01/2024, ST 24/01/2024, IOM 31/01/2024, ST 01/02/2024).

On 8 January 2024, clashes broke out in North Kordofan in the town of El Obeid between SAF and RSF. Likewise, on 07 January clashes occurred in the town of Dilling town in the state of South Kordofan between SAF and RSF. These clashes led to the displacement of 2,840 people. On 19 January 2024, RSF launched an offensive on Abassiya in South Kordofan, displacing 1,500 people to the villages of Al Tomat, Al Zubl and Um Algura. The forced displacement of people fleeing the area creates the risk of targeted attacks, summary executions, arbitrary arrests and kidnappings (REACH 23/11/2023, OCHA 14/01/2024, Protection Cluster 16/01/2024, IOM DTM 20/01/2024).

In the state of Khartoum, in the regions of Kordofan and in the states of Darfur, ongoing clashes compromise the protection environment for populations in need. Heavy clashes hinder the effective protection of civilians, and this considerably increases their vulnerability to risks of harassment and physical assault. The highest severity of protection and multisectoral needs are reported in the most conflict affected states such as Kordofan and Darfur and in the Khartoum region. These areas are also considered as acute protection hotspots (OCHA 12/10/2023, ACLED 12/01/2024, Protection Cluster 22/01/2024, IOM 02/02/2024).

Figure 18: Map of protection hotspots in Sudan as of 31 December 2023 (Source: Mapbox, Protection Cluster, OCHA)
Overall Situation

The expansion of conflict is worsening Sudan's fragile humanitarian context and exacerbating people's vulnerabilities and exposure to humanitarian protection risks.

The population in need of protection has markedly and continuously increased in Sudan since the publication of the HNO 2023 in November 2022, followed by the revised version of the HRP in May 2023, and most recently, the HNRP 2024. People in need of general protection figures have risen from 4.1 to 7.7 million, in General Protection, numbers of children in need of child protection have risen from 3.8 million to 6.2 million in Child Protection, and numbers of people in need of GBV support has risen from 3.1 million to 6.7 million in GBV. There has also been a near tripling in the number of people in need for Mine Action, reaching 6 million in the HNRP 2024 released in December. However, this escalation in protection needs has not been met with increased coverage in responses. The percentage of the targeted population to receive assistance in this sector has either stagnated or decreased across all protection subsectors, except for Mine Action. However, these data should not suggest an improvement in the situation but rather be viewed in the context of the extremely alarming proliferation of these devices across Sudan, which explains the increase in response (HNRP 2023, HNO 2023, HNRP 2024).

Challenges in accessing humanitarian protection services worsen vulnerabilities and increase exposure to protection risks. Limited access to resources and humanitarian aid amid generalized violence heightens the vulnerability of those in need, amplifying their exposure to protection risks. The shortage of essential goods and survival resources often leads to tensions between communities. Widespread violence and ethnic tensions might be exacerbated by difficulties of humanitarian services access (HNRP 2023, IPC 02/08/2023, NRC 22/12/2023, HNRP 2024, FEWSNET 06/01/2024, Cluster Response assessed 24/01/2024).

Since the outbreak of the conflict, Khartoum has been the scene of recurring violent clashes. In the regions of Darfur and the Kordofan states, the bombardments remain equally violent. These regions correspond to the acute protection hotspots targeted by the protection cluster. Targeted attacks on civilians are persistent and brutal. Civilian infrastructure and property are being destroyed in total disregard for humanitarian protection rules (Protection Cluster 22/01/2024, IOM 02/02/2024).

The ongoing violence of the Masalit tribes constitutes a humanitarian disaster triggering major humanitarian protection concerns.

As reported by the UN Panel of Experts, the Masalit group continues to face widespread ethnic cleansing in the West Darfur region. Non-Arab populations are attacked, assaulted, insulted, harassed, and executed due to their ethnic difference from RSF members. In El Geneina, women and young girls are targeted and raped by RSF members because of their ethnic origin. Sexual violence against women and girls is widespread and systematic. Men are targeted and executed. Non-Arab populations trying to flee West Darfur are stopped at RSF checkpoints. Civilian goods owned by Masalit and non-Arab communities are systematically attacked, burnt and destroyed. These targeted attacks increase the risk of eradicating the Masalit, which could constitute a war crime and a crime against humanity. (ACLED 17/01/202, Sudan War Monitor 23/01/2024).

The conflict is having a significant impact on the lives of women and children, increasing their exposure to violence and other protection risks, and driving the adoption of negative coping mechanisms.

In 2023, approximately 14 million children in Sudan were confronting acute humanitarian vulnerabilities, with 6.2 million children requiring child protection assistance. These children are no longer attending school and face a high risk of abuse. Sudan is grappling with the largest crisis of displaced children globally, with 9 out of 10 displaced children lacking access to education in 2023. This figure could rise as the number of internally displaced persons increases due to the violent clashes. The dire circumstances faced by children affected by the conflict compel them to resort to negative coping mechanisms, including joining armed groups, engaging in prostitution,
or begging. These negative coping mechanisms increase their exposure to abuse and exploitation risks (HNRP 21/12/2023, OCHA 27/12/2023, OCHA 28/12/2023, OCHA 21/01/2024).

Women, like children, are vulnerable to risks of protection. They are disproportionately affected by the conflict. They suffer extreme poverty and have very limited access to essential and basic services. Safety and security are major concerns. The lack of money for safe transportation exposes them to the risk of attacks, human trafficking, and gender-based violence. 6.7 million women are at risk of gender-based violence. Tensions and vulnerabilities faced by the communities increase the risk of domestic violence. The pervasive violence of the armed conflict exacerbates the risks of conflict-related sexual violence. Women are vulnerable to aggression within their communities and risks of attack outside them. In the context of this conflict, women and young girls suffer systematic gender-based violence when they leave the community. They face a high risk of assault when carrying out their daily activities, such as using latrines or going to markets. These gender-based attacks cause acute psychological trauma and expose women to stigmatization. Cases of sexual slavery have been reported in areas of Darfur controlled by RSF. Women and girls are reported to be forced to live in enslaved conditions and to marry for ransom (IOM 15/12/2023, NRC 22/12/2023, OCHA 27/12/2023, NRC 01/01/2024, UNHCR 08/01/2024).

In light of these concerns, GBV humanitarian actors provided psycho-social support, material and legal assistance, including life-saving responses to 201,608 people in need of GBV protection between 15th April and 31st December 2023, in Sudan. In Wad Madani in Aj Jazirah State, for instance, 4,000 survivors of GBV were reached by humanitarian actors. Despite significant support from humanitarian actors, the intensification of the conflict and the insecurity are hampering humanitarian operations and exacerbating the exposure of vulnerable populations to protection risks (UNFPA 05/02/2024, OCHA 12/02/2024).

**Shelter**

**Key Figures**

- According to HNRP 2024, 8.6M people are in need of shelter assistance (OCHA 21/12/2023).
- Findings from the recent Displacement Tracking Matrix (DTM) show that across Sudan an overall 80% of assessed IDP households identified NFIs as one of their priority needs. This rises to 100% in West Darfur and River Nile states. The numbers are quite high in East and South Darfur and Aj Jazirah states as well (IOM 02/02/2024).
- Shelter remains as a priority need identified by more than 60% of the assessed households in South Darfur, West Kordofan, Blue Nile, and Aj Jazirah states (IOM 02/02/2024).

**Latest developments**

**Armed clashes in Al Fasher cause significant damage to residential houses, exacerbating an already dire humanitarian situation**

Artillery clashes between the Sudanese army and RSF in Al Fasher, the capital city of North Darfur in the last week of January and the beginning of February have resulted in widespread damage to civilian infrastructure, particularly civilian homes. The town is a notable IDP hub, hosting displaced people from the Darfur states. This incident exacerbates the already dire humanitarian situation in Al Fasher as the city grapples with shortages of food, fuel, medicine, and other necessities. The month of January also saw similar instances of clashes between SAF and RSF in Khartoum and Nyala town, which led to heavy shelling in residential areas causing damage to houses and fueling further displacement (Sudan Tribune, OCHA, 04/02/2024, 01/02/2024, FEWS_NET 06/01/2024, UNHCR, 16/01/2024).
Overall Situation

The crisis in Sudan has led to a near tripling of People in Need (PIN) of shelter assistance, rising to 8.6 million by December 2023, while people targeted for assistance fell to 24%. This indicates an increasing disparity between growing needs and capacity to respond.

Since the conflict outbreak, shelter needs have proliferated in the country, with the number of people in need of shelter assistance tripled within a year, escalating from 2.9 million reported in HNO 2023 to 5.7 million in its revised version in May 2023 and to more than 8.6 million as per the latest HNRP 2024, published in December 2023 (OCHA 21/12/2023, OCHA 07/11/2022, OCHA 17/05/2023). However, the percentage of those targeted for assistance has decreased from 33% in May 2023 to around 24% in early 2024, indicating a widening gap between aid capacity and the escalating crisis (OCHA 21/12/2023, OCHA 07/11/2022, OCHA 17/05/2023). The latest HNRP outlines a funding need of $212.4 million for just shelter alone of which only 0.4% have been covered as of 9 February 2024 (OCHA FTS, accessed 09/02/2024).

South Darfur, River Nile and Aj Jazirah states continue to be IDP hubs amidst growing tensions with host communities which can potentially force people to seek shelter elsewhere.

States including South Darfur, River Nile, East Darfur, and Aj Jazirah host the largest numbers of internally displaced persons (IDPs) in Sudan. However, a recent increase in violence in parts of Aj Jazirah state has forced many people to move to new areas. As a result, there is a higher need for additional shelters, with the International Organization for Migration (IOM) noting in its weekly displacement report (Issue 17) that 73 new locations were identified as gathering sites for displaced persons within just one week (IOM 16/01/2024). Port Sudan in Red Sea state has seen a large increase in these displaced shelters and many of the IDPs in the state are reportedly being hosted in schools (OCHA 10/01/2023, Dabanga Sudan, 24/01/2024).

Limited infrastructure and growing competition over resources have somewhat strained the relationship between IDPs and their host communities in many parts of the country. The total percentage of IDPs seeking accommodation with host communities has now fallen from 77% to 67% in January 2024 with only 7% of IDPs living in rented accommodation. A significant number of IDPs (12%) continue to live in schools or public buildings followed by camps (7%), open-area informal settlements (6%), and improvised critical shelters (1%) (IOM 02/02/2024). Data from the recent DTM indicates that the situation is more dire in some of the Darfur states. Indeed, in Central Darfur, only 32% of the IDPs live with host communities with an equal number of the population group now living in informal settlements (33%) (IOM 02/02/2024). A similar pattern was also seen in North Darfur, where nearly one in four assessed IDP respondents lived in an open area informal settlement. South and West Darfur states have also seen a gradual increase in the number of IDPs living in schools and public buildings (IOM 02/02/2024). There have also been reports of IDPs requiring urgent relocation due to increasing tension with host communities in some parts of Kassala state (OCHA 27/12/2023). A detailed analysis of this situation can be found in DFS – iMMAP Inc. Shelter Thematic Report, published on 31 January, 2024.
Access to shelter remains a prominent issue as many continue to live in overcrowded, informal and makeshift shelters.

There continue to be multiple reports of the displaced households living in overcrowded shelters in very cramped conditions, often sharing rooms with families. These shelters have very limited access to clean water and sanitation facilities. Many—including children, women, the elderly, and others with specific needs—find themselves packed into these spaces or are forced to sleep outdoors which further exposes them to violence and other protection risks (IOM 29/12/2023, NRC 11/12/2023, OCHA 26/12/2023).

A rapid needs assessment (RNA) carried out in December in Sennar State, a frequent transit point for internally displaced persons (IDPs) heading to Gedaref, Kassala, and Blue Nile states, reveals that 73% of the surveyed individuals reported a lack of access to shelter. The assessment found that many IDPs fleeing conflicts were living in makeshift shelters primarily constructed from tarpaulins. Additionally, some were found staying in the classrooms in the schools (NRC 27/12/2023). This situation is further supported by updates from DTM which indicate a rise in the percentage of IDPs residing in open area settlements in Sennar State from 0.9% in November 2023 to 8% in January, as conflicts in that state were intensified (IOM, 30/11/2023, IOM 29/12/2023, IOM 02/02/2024). This increase occurred due to growing tensions between IDPs and host communities over limited resources and competition over humanitarian aid. Indeed, shelter was listed as the main priority need by 41% of the respondents in the state (NRC 27/12/2023). A similar assessment conducted in Al Fao locality in Gedaref state involving IDPs who have settled in the gathering sites or in streets after being displaced by the ongoing conflict in Wad Madani also found that 63% of interviewed IDPs indicated that they did not have access to shelter and those who did were visibly living in damaged housing. Similar to Sennar, here as well a significant number of IDPs (11%) lived in makeshift shelters (NRC 28/12/2023). Although this could be a temporary situation as most of these IDPs are newly displaced and these areas often act as transit sites, overall the percentage of IDPs living in
critical/improvised shelters has gradually increased from 0.4% in September 2023 to 1% in January 2024 (IOM 02/02/2024).

The need for Non-Food items (NFIs) has steadily grown in Sudan with many IDPs mostly living in camps, public buildings, and open shelters citing an increasing demand for NFI kits.

Non-food Item (NFI) needs remain a significant concerns for the displaced populations throughout Sudan, with an overall 80% of IDP households identifying it as a priority need in the DTM (IOM 02/02/2024). The number goes up to 100% in West Darfur and River Nile states. It is to be noted that these are also states which host a significantly larger percentage of IDPs in schools and public buildings where there is a high demand for these items (IOM 29/12/2023, IOM 02/02/2024). The Sudan Humanitarian Response dashboard indicates that although nearly 260,000 people received NFI assistance in the period between April - October 2023, the gap is still significant as the NFI needs continue to grow under an unprecedented displacement rate (OCHA, 20/11/2023). Indeed, assessments conducted during December in Sennar and parts of Al Gedaref state have found that there is a high need for NFI kits amongst newly displaced IDPs living in camps, schools, and in open makeshift shelters. Most of the households required sleeping mats, blankets, mosquito nets and kitchen utensils. Indeed, in Al Fao locality, the RNA revealed that only 41% owned sleeping mats which means that 59% might be sleeping directly on the floor (NRC 27/12/2023, NRC 28/12/2023).

Figure 20: A map on the percentage of NFI needs across states (Source: DTM)
Lack of financial resources and high rental prices in the IDP hubs of eastern and northern Sudan is pushing many families to reside in unsafe and open shelters.

The escalation of the conflict on April 15 resulted in a drastic surge in rental prices in many parts of the country as people fled from the capital and Darfur states to seek shelter possibilities elsewhere. This increase was notably reported in Red Sea State, Kassala, Gedaref, and River Nile. Coverage by local news portals found that the cost of renting a one-bedroom house with a living room ranged from SDG500,000 (USD 831) to SDG1 million (USD 1664) in many of these areas with prices going up to SDG1.5 million (USD 2496) and more in certain Port Sudan neighborhoods. To note, the average income for a person in Sudan is around SDG 436,200 (USD 725) with 25% of the population earning less than SDG 254,700 (USD 423) (World Salaries, accessed 20/02/2024). Recent trends indicate a notable shift of displaced persons from Aj Jazirah state to Port Sudan, presenting significant challenges. The RNAs conducted in Sennar and Gedaref states showed that the lack of financial resources was the main barrier hindering IDPs from finding and living in better housing. The inability to pay the rent can also push these groups to seek shelter elsewhere. This can be observed in the findings from the monthly DTMs which show that the percentage of IDPs living in rented accommodation, especially in these states, have decreased within the span of three months. For instance, in Red Sea State, in September 2023, an estimated 32% of IDPs lived in rented accommodation whereas the number now stands at 26% at the end of December 2023 (IOM 28/09/2023, IOM 29/12/2023). The percentage of IDPs living in open area informal settlements and schools in these states has seen a gradual increase, with high rental prices likely to be a contributing factor. There have been reports of many IDPs being pushed to seek shelter in youth centers, as well as abandoned schools and other vacant buildings because they were unable to afford the rent (Dabanga Sudan 08/01/2024, IOM 28/09/2023, IOM 29/12/2023, IOM 12/01/2024).

The conflict continues to cause widespread damage to private homes with reports of looting and burning of houses becoming very common in parts of the country.

International and national media outlets continue to report massive destruction and looting of homes in many parts of the country, most particularly noted in Khartoum and other active conflict zones. Nyala town remains a major area where growing insecurity in the last months of 2023 caused widespread attacks on individual homes as well as burning and looting of major markets. Sudan is also grappling with the aftermath of a flooding season which damaged or destroyed nearly 8,000 homes affecting nearly 90,000 people. This along with ongoing clashes including shelling and air raids in many urban areas continue to drive displacement forcing many to live in unsafe and inadequate accommodations (Reuter 29/12/2023, Sudan Tribune, 02/01/2024, IOM 16/01/2024, OCHA 27/12/2023, Sudan War Monitor, 17/01/2024).

**WASH**

**Key Figures**

- Between 30 November 2023 and 24 January 2024, the number of IDPs identifying water as a priority went up from 48% to 55% (IOM 02/02/2024, IOM 30/11/2023).
- Between 30 November 2023 and 28 December 2023, the number of IDPs identifying sanitation as a priority went up from 39% to 45% (IOM 02/02/2024, IOM 30/11/2023).
- The median price of water containers has risen 54% nationally (REACH 31/10/2023).
- The median price of the hygiene Minimum Expenditure Basket (MEB) has risen 57% nationally (REACH 31/10/2023).
- Between 15 April and 31 December 2023 approximately 6.5 million people were reached with water, sanitation and hygiene services, with 2.5 million of those being reached in December (OCHA 04/02/2024).
Latest developments

Access to WASH services continues to deteriorate mainly because of increased costs, the influx of IDPs combined with limited sanitation infrastructure and lack of potable water.

The broad deterioration in population’s ability to access adequate WASH services is primarily driven by high cost of access to clean water, an increased strain on sanitation infrastructure from the influx of IDPs, and often poor quality of available water. The price of WASH NFIs and hygiene items have also risen significantly (IOM 02/02/2024, IOM 30/11/2023, REACH 31/10/2023).

![Figure 21: Percentage change in prices of Hygiene and sanitation items from pre-crisis levels. Source: Joint Market Monitoring Initiative (JMMI), REACH Initiative, October 2023](image)

Overall Situation

The 2024 HNRP projects that nearly 18.9 million individuals (38% of the population) will require WASH assistance in 2024 compared to 11 million before the conflict (as per the 2023 HNO). This represents a 73% increase in the number of people in need. Half of the people in need (8.9 million) have been targeted for WASH assistance in 2024 (OCHA 07/11/2022, OCHA 21/12/2023). WASH related needs are also growing in severity, with 17 localities identified as in severity level 5 (I) primarily in Greater Darfur, up from 0 in 2023, and 113 localities identified as severity level 4, an increase of 75 from 2023 (OCHA 07/11/2022, OCHA 21/12/2023).
Ongoing conflict and security issues are making it hard to get to essential goods and stopping officials from providing important services. Consequently, communities are resorting to unsafe water sources, facing difficulties in accessing sanitation and hygiene services, resulting in deteriorating health outcomes.

Widespread insecurity across several states is caused by ongoing conflict, crime, violence between communities, and attacks in remote areas, affecting major cities. This situation leads to a shortage of services, looting of markets, and a lack of goods. This has led to the gradual and drastic collapse of essential services, especially those pertaining to water and market access.

The widespread conflict and incidents of armed theft on the roads is limiting the delivery of critical supplies in greater Kordofan where the majority of water is transported by tanker according to the 2022 MSNA (IOM 02/06/2023, IOM 02/02/2024). As a result the number of IDPs identifying water as a priority need increasing 8% points to 34% in North Kordofan during December 2023 (IOM 29/12/2023, IOM 30/11/2023).

In South Darfur 96% of IDPs identified that NFIs were available but not safe to access, while REACH data indicated over 100% increase in the median cost of hygiene MEB (IOM 29/12/2023, REACH 31/10/2023, Radio Dabanga 12/01/2024). This has also translated into people purchasing unsafe water, with the Sudanese Red Crescent in South Darfur highlighting the growing impact saying: “more and more people complain of stomach problems, typhoid fevers, kidney and urinary tract infections, and other diseases” (Radio Dabanga 22/12/2023). As a result, IDPs in South Darfur face critical WASH needs, with 89% identifying water as a priority need and 84% identifying sanitation as a priority need. The primary challenge with access to water is around quality, with 97% of IDPs indicating that water was available but not of good quality (IOM 29/12/2023).

Disruptions to electrical grids and disrupted operations of water supply stations are significantly affecting the population’s ability to access water.

Service outages of water pumping stations in Aj Jazirah, caused by conflict related damage, lack of maintenance and poor power distribution is making it hard for people to access water that is usually pumped into homes, which is the main source of water in both urban and rural areas. (IOM 23/01/2024, IOM 02/02/2024, France 24 01/09/2024, OCHA 27/12/2023). In Kassala the inter-sectoral rapid needs assessment identified that people in both urban and rural regions are facing water scarcity as a result of malfunctioning water supply and related power generation systems forcing IDPs to purchase water from vendors (OCHA 27/12/2023). Power outages in Khartoum and Bahri due to clashes between RSF and SAF (including recent airstrikes) are also causing water shortages as water stations remain non-functional (Sudan Tribune 10/01/2024, ACLED 01/12/2023, ACAPS 11/09/2023).

The growing number of displacements is straining WASH services and facilities, causing costs to rise even when resources are available. This forces more individuals to use unsafe water sources and puts extra strain on the few available sanitation facilities, especially during a severe cholera outbreak.

In December, the spike of displacements towards Blue Nile, from Aj Jazirah, as well as from Kurmuk locality from within Blue Nile, is increasing pressures on already insufficient water sources in urban areas in Ed Damazine and Ar Rusayris localities where the majorities of these IDPs congregate. (IOM 02/02/2024, IOM 23/01/2024). Before the conflict, according to the 2022 Multi-Sector Needs Assessment (MSNA), 41% of households reported drinking from unsafe, unfiltered surface water. Additionally, 73% of IDPs mentioned that while water was available, it was not affordable, and 20% stated that the water was of poor quality. It is likely that growing pressures and disruptions in trade are driving up the cost of water, leading more people to rely on unsafe water sources (IOM 02/02/2024). The takeover of El Gutaina in White Nile State by the Rapid Support Forces (RSF) has heightened concerns about escalating conflict in the state. This situation is causing more people to be displaced within the state, moving towards southern areas that lack sufficient WASH infrastructure (IOM 02/02/2024). A recent assessment by NRC indicated that 98% of respondents had access to latrines and sanitation facilities, but with
a clear gap in the quality of the facilities, likely worsening a fatal cholera outbreak in the state (NRC 28/01/2023, Radio Dabanga 15/12/2023, IOM 02/06/2023).

In Red Sea and Kassala 88% and 49% of the population respectively accessed water that was transported by tanker according to the 2022 MSNA, making the price of water particularly sensitive to the rising costs of transportation (IOM 02/06/2023). As a result IDPs in Red Sea and Kassala are facing rising costs, limiting the ability of communities to access water particularly in Red Sea state where 88% of IDPs identify water as a priority need (IOM 02/02/2024). An inter-sectoral rapid needs assessment of 19 locations in Kassala found that half the water points were not functional, with IDPs forced to buy water from vendors who transport it in trucks and donkey carts, with 9 of the locations indicating water was too expensive. The same assessment found that 51 to 71% of communal latrines were non-functional (OCHA 27/12/2023).

In Red Sea state where government institutions, the private sector and aid agencies are congregating these cost related challenges are particularly acute with 100% of IDPs indicated that NFIs were available but not affordable and REACH JMMI data indicating a 69% increase in the median cost of the hygiene MEB and a 69% increase in median cost of water containers (IOM 02/02/2024, REACH 31/10/2023).

The support from communities hosting IDPs has played a crucial role in meeting WASH needs. However, this support is at risk as resources become scarcer and the costs associated with accessing essential WASH services continue to increase.

Communal solidarity and mutual aid initiatives have meant that the majority of IDPs have been hosted within the community, this has direct impact on WASH needs, for example 83% of IDPs identified that they had safe access to latrines due to the use of neighbors’ facilities. However as the war extends and resources are depleted these social bonds are weakening, creating a further risk of deterioration (CARE 01/10/2023, HPN 11/10/2023). This contrasts with the challenges that populations are facing in accessing hygiene NFIs, 61% of women in the CARE assessment did not feel that their menstrual hygiene needs are being met. This finding is echoed in the JMMI data made available by REACH, with the median cost of the hygiene MEB growing between 37% (South Kordofan) and 131% (Central Darfur) and the cost of a water container growing between 40% (Central Darfur) and 108% (South Darfur), and only 36% of respondents identifying that sanitation pads were widely available in markets (REACH 31/10/2023).

The major reasons behind the wide scale drastic lack of access to improved water are mainly the inability of the population and/or technical/operation cadre to reach the water facility sites due to insecurity, complete or partial stoppage of the water facilities due to unavailability/looting of water treatment inputs (mainly chlorine and polymer), destruction of pumping, distribution and/or storage units or lack of Operations and Maintenance budget (UNICEF KI 12/02/2024).

In Darfur, water is becoming an increasingly costly critical need, despite the expectation of its increased availability after the rainy season. There are also widespread reports of people practicing open defecation and many people have also flagged a lack of humanitarian assistance.

In Darfur where populations primarily access water via wells both protected and unprotected, we are seeing significant increase in the number of IDPs(76%)identifying water as a priority need and over 93% identifying that water is available but not affordable in 4 out of the 5 states (IOM 02/02/2024). This is particularly concerning as after a rainy season heavy enough to drive flooding in the region, ground water should have seen significant recovery making water readily available if not necessarily safe (OCHA 30/01/2023, IOM 02/06/2023).

In West Darfur in particular, the widespread displacement towards various underserviced locations is putting pressure on wells with 99% of IDPs in the state identifying water as a priority need and 98% identifying it as available but not affordable (IOM 02/02/2024, IOM 02/06/2023). Compounding the challenges around access to water is the dependence of populations on unprotected wells and sanitation, with an assessment by REACH in
West Darfur indicating that 59% of populations accessed water from unprotected sources, and 38% reporting defecating in open hole latrines and 26% practicing open defecation (REACH 23/11/2023).

Another assessment by REACH on hard-to-reach areas of East and Central Darfur found that across almost all assessed settlements that people had not received assistance in the month prior to the data collection, which is concerning as in East and Central Darfur respectively, 67% and 53% of the populations reported that the main sanitation facility used by most of the population was an open pit latrine, with 16% of the population in East Darfur practicing open defecation and 14% drinking from unprotected sources (REACH 05/12/2023, REACH 27/12/2023).

In North Kordofan, the main barriers to water access are broken wells, high prices, and travel risks. High costs also limit hygiene items, and insecurity blocks upkeep of sanitation facilities.

The government of North Kordofan has reported that in southern parts of North Kordofan, where the majority of IDPs in the state are congregating, that 18 of 38 wells are in operation. Combined with the widespread insecurity across the region this has meant that IDPs cannot access water and Hygiene NFIs due to it being unaffordable or the danger in travelling long distances (IOM 02/02/2024, Radio Dabanga 31/01/2023).

As a result, the challenges around access to WASH services in many of these areas are mainly driven by disruptions in service provision including the maintenance of sanitation facilities, and the broad insecurity along roadways limiting the mobility of populations seeking to access those wells, impacting the availability and driving the price of water as well as hygiene and sanitation products (REACH 31/10/2023, IOM 02/02/2024).

WASH cluster partners met 2023 response goals primarily in cities and via cross-border efforts, but face challenges in serving severity 4 and 5 locations. To address this, partners are looking towards more innovative solutions as well as preparedness measures to respond quickly when access opportunities occur.

In 2023 UNICEF and WASH cluster's partner organizations reached 6.5 million people surpassing the 6.1 million target – although this target represented only 40% of the number of people projected to be in need of assistance in 2023. The majority of those reached are in highly urban localities across the country such as in Medani Al Kubra in Aj Jazirah (758,691), Um Durman in Khartoum state (340,000), Port Sudan in Red Sea state (249,517), Madeinat Al Gedaref in Gedaref state (245,452), Atbara and Ed Damar in River Nile state (243,895), Al Fasher in North Darfur (419,980), Ad Du‘ayn in East Darfur (312,434). These urban populations were reached through bulk water treatment by provision of chlorine and polymer of the already existing water supply or treatment plants and water trucking. In addition, some communities benefited from constructed or rehabilitated water sources. Additionally partners have reached populations living in areas accessible through cross-border operations such as in Ag Geneina and Kulbus in West Darfur (348,074), and As Salam in White Nile state (163,495) (OCHA 31/12/2023, WASH Cluster KI 12/02/2024, UNICEF KI 13/02/2024).

This leaves significant gaps in several states and localities including those that have been identified as having needs at level 4 or 5 severity rating by the 2024 HNO, highlighting the challenges of operating in a context rife with access constraints, security challenges and limited funding. These constraints have led to unsustainable response modalities heavily dependent on supplies and emergency temporary latrines (OCHA 31/12/2023, OCHA 21/12/2023).

As a result, the WASH cluster seeks to strengthen the response in 2024 through the use of innovative or sustainable approaches, such as solar power for water sources, integrated programming, cash responses and pre-positioning of supplies. Partners will seek to work around challenges relating to access through remote consultations, and the involvement and capacity building of local authorities and community-based organizations (OCHA 21/12/2023).
Education

Key Figures

- Nearly 19 million school-age children are out of school, including 7 million who have been out of school prior to the conflict (OCHA 07/11/2022, OCHA 21/12/2023).
- The latest HNRP estimates that 2.3 million school-aged children are internally displaced and 690,000 are displaced across borders (OCHA 21/12/2023, Sudan Education Cluster, Save the Children, and UNICEF 07/11/2023).
- 75% of the 2.3 million IDP school-age children have no access to education (IOM 02/02/2024).
- 1,540 schools are currently used as emergency shelters for the displaced population across the country (Education Cluster KI 12/02/2024).
- Since April 2023, 842 safe learning spaces have been established by Education Cluster partners reaching around 230,900 children providing them with protection, social connection and learning opportunities (UNICEF 01/02/2024).

Latest developments

Despite state authorities declaring their intention to reopen schools in mid-November, only a few schools in some states have reopened.

As of February 2024, approximately 19,300 schools in Sudan remain closed. Despite Sudanese authorities declaring the resumption of studies in universities and schools in safe areas by the end of October, only a few schools have reopened in River Nile, West Darfur, North Darfur, and Aj Jazirah states (Radio Tamazuj 03/01/2024, IOM 05/12/2023, Radio Dabanga 04/01/2024, Radio Tamazuj 08/01/2024, OCHA 08/01/2024, IOM 09/01/2024). There is no official information regarding the number of schools that have reopened.

Education stakeholders in Sudan are resisting school reopenings due to various unresolved issues such as financial disputes between teachers and the government, security risks, destruction of school buildings, use of schools as emergency shelters, and fears that resuming classes in safer areas could widen disparities among children across the country..

The Sudanese authority's decision to reopen schools in safe areas has sparked objections of education bodies across the country (Radio Dabanga 11/11/2023). The Sudanese Teachers' Committee objected to any attempt to reopen schools without addressing key issues. These include financial disparities among schools in different states, security challenges ranging from ensuring safe routes to removing military presence from schools in conflict areas, and administrative issues, such as the provision of third-grade textbooks (BNN 09/12/2023, OCHA 08/01/2024). The River Nile State Teachers Committee objected to reopening schools, expressing concerns that it may exacerbate existing disparities among children nationwide. They emphasize that the need for reopening schools needs to be an "education process based on an integrated vision and not a process leading to fragmentation" (Radio Dabanga 11/11/2023). Furthermore, educational bodies in River Nile state and other states such as Northern and Kassala highlighted the destruction of school facilities, the use of schools as shelters by displaced people, insufficient learning materials, and unpaid salaries of teachers as primary reasons for their objection. In late January 2024, the UNICEF representative in Sudan stressed the need to pay wages to teachers to facilitate and support the reopening of schools (IOM 05/12/2023, OCHA 08/01/2024, UNICEF 20/12/2023, Radio Dabanga 11/11/2023, Radio Dabanga 19/01/2024, UN News 25/01/2024).

Overall situation

Since the outbreak of the conflict, Sudan's education crisis has intensified, leaving nearly 19 million school-aged children across the country out of school and a generation of Sudanese children at risk of missing out on education.

Before April 2023, 3.7 million school-aged children needed humanitarian support to access quality learning opportunities. This includes IDPs, refugees, returnees, and non-displaced vulnerable children. The 2023 HNO
estimated that at the end of the 2021-2022 school year, 6.9 million children, mainly those living in conflict-affected areas, were out of school (OCHA 07/11/2022). Since then, the conflict has affected all aspects of the education sector. According to the revised HRP, published in May 2023, the number of people in need more than doubled, with 8.6 million school-aged children requiring assistance, and most schools being closed in conflict-affected areas (OCHA 17/05/2023).

The already fragile education system in the country is collapsing, leading to a generation of Sudanese children missing out on education. Ongoing hostilities in the country continue to drive many children out of their homes in search of safe shelters, leaving the majority of Sudan’s school-age children (19 million out of 23 million) out of school (OCHA 07/11/2022, OCHA 14/12/2022, Education Cluster and UNICEF 10/11/2023, OCHA 21/12/2023, UNICEF 28/12/2023, UN News 25/01/2024, UNICEF 01/02/2024).

As the majority of the schools remain closed or are turned into shelters for IDPs, and funding for the sector remains low, cluster partners are offering safe learning spaces as an alternative.

Over half of the children enrolled in schools in the conflict-affected states, approximately 6.4 million, had their learning disrupted, with their education suspended two months before the end of the academic year in April 2023. In addition, 10,400 schools were forced to close in April 2023 and there is uncertainty whether they will remain closed in 2024 (Education Cluster, Save the Children, and UNICEF 05/09/2023, Education Cluster KI 12/02/2024). Furthermore, 1,540 schools are currently used as emergency shelters for the displaced population across the country (Education Cluster KI 12/02/2024). Education facilities continue to be destroyed, looted and used by armed actors, the extent of these issues remains unknown (Education Cluster KI 12/02/2024).

Despite the considerable needs in the education sector, only 15% of the required funding was secured in 2023, so shortages in funding should be expected considering the current context (OCHA accessed 25/01/2024). Education cluster partners are actively working to mitigate the absence of functioning schools. Since the conflict began in mid-April, 842 safe learning spaces have been established in non-conflict states and in safe pockets of the conflict-affected states, reaching around 230,900 children providing them with protection, social connection and learning opportunities (UNICEF 01/02/2024).

Education remains constrained for IDPs around the country, with 75% of the 2.3 million internally displaced school-age children having no access to education.

Conflict has caused the internal displacement of 2.3 million school-aged children, a threefold increase compared to the previous year. Additionally, 690,000 school-aged children have been displaced across borders into neighboring countries (OCHA 07/11/2023, OCHA 21/12/2023, UNICEF 01/02/2024, Education Cluster KI 12/02/204). To date, education remains constrained for internally displaced school-aged children across Sudan leaving the vast majority of internally displaced children deprived of safe, inclusive and quality education and the multitude of short- and long-term advantages it affords (IOM 02/02/2024, Education Cluster KI 12/02/204).

The latest information provided by IOM monthly report indicates that 75% of IDPs school-aged children have no access to education, a decrease of 11 percentage point since the last IOM monthly report (IOM 09/01/2024, IOM 02/02/2024). The situation continues to be worse in terms of access to education for IDPs living in the conflict areas- especially Khartoum State and most of Darfur States (IOM 09/01/2024, IOM 02/02/2024). In addition, in Blue Nile, Aj Jazirah and Kassala states, access to education for IDPs had worsened dramatically (IOM 06/10/2023, IOM 09/01/2024, IOM 02/02/2024).
For school-aged children among IDPs, the main obstacles to education are overcrowded schools, insufficient financial resources, and the long distances to schools. This limited access to education increases their vulnerability to various protection risks.

According to IOM, the main obstacles preventing IDPs school-aged children from attending school are overcrowded classrooms, financial constraints, and the distance of schools from their current location (IOM 06/10/2023, IOM 09/01/2024, IOM 02/02/2024). In an assessment of hard-to-reach areas in Central Darfur and in West Darfur, more than 90% of the KIs said that basic services including education were not available for IDPs (REACH 23/11/2023, REACH 27/12/2023).

In both REACH assessments in Central Darfur and in West Darfur, KIs reported that the reasons for such persisting closures were the destruction or damage of educational facilities, lack of personnel, and insecurity (REACH 23/11/2023, REACH 27/12/2023). An inter-sectoral rapid assessment conducted in Kassala in November 2023 indicated that 90% of the IDPs school-aged children stopped attending school or reduced their attendance at school as a result of the conflict. Primary reasons cited for non-attendance were that schools are being used as emergency shelters, schools being far away, and IDP children need to work to support their families. Moreover, it was cited that for host community school-aged children, the primary reasons for non-attendance were that school infrastructure was damaged or destroyed, and that teachers were no longer able to work (OCHA 27/12/2023).

Continuous delays in the resumption of education services could also expose children, particularly the marginalized and vulnerable children, to severe trauma, to protection risks such as child trafficking, early marriage, gender-based violence and abuse and other forms of exploitation (Education Cluster KI 12/02/2024).

Given the absence of food, NFI and access to health, education remains a lower priority among IDPs.

Although education is a fundamental requirement and is important in the long term, it does not currently emerge as a top priority for IDPs. The pressing need for food, NFI and health takes precedence, as IDPs find themselves unable to prioritize education in their current circumstances. According to the latest IOM Monthly Displacement Overview, education ranks as the third least priority for IDP households. In contrast, food, non-food items (NFI), and health were identified as the first, second, and third priorities, respectively (IOM 02/02/2024).

To alleviate the impact of schools being used as shelters by IDPs, multiple steps were taken by responding organizations.

In a joint advocacy paper for practical solutions regarding schools used by IDPs, the following were proposed: Reducing the number of occupied schools by consolidating residents in one location to free up learning spaces in areas where schools are in close proximity; establishing alternative learning spaces (temporary learning spaces – TLS) around the occupied schools, when possible; utilizing public facilities including mosques as temporary learning spaces; introducing morning and afternoon shifts in schools (CCCM Cluster 24/09/2023, CCCM Cluster 20/11/2023).

After the conflict broke out in April 2023, UNICEF relaunched its Learning Passport, a program based on the national curriculum for grades 1 to 8, available online and offline. The program aims to support children in conflict-affected areas where schools remain closed and especially in IDP impacted areas. In October, it was estimated that the platform reached 22,300 newly displaced children (UNICEF 15/07/2023, OCHA 08/10/2023, UNICEF 02/2024).
DFS Analysts and Information Management Officers collate and structure available information in the DEEP platform daily. Each piece of information is tagged based on the pillars and sub-pillars of the DFS/IMMAP Inc. Sudan Crisis Framework which was based on the JIAF and developed in line with successful models used across previous projects. The framework is shown in Figure 23 and comprises the humanitarian conditions (by sector) and the operational environment. All the captured information receives additional tags to allow examination of different categories of interest (such as affected group, geographic location, demographic profile etc.).

The analysis provided is a synthesis of the information that was collected and tagged from publicly available sources and supplemented by data provided by humanitarian partners working in Sudan and neighboring countries. Maps and visuals have been created by iMMAP Inc. For this report, 685 documents (collected between December 1 2023 and January 31 2024) were reviewed, sourced from 84 authors or organizations, resulting in a total of 5,324 entries being tagged. The distribution of excerpts per sector is shown in Figure 22.

An interactive DEEP Dashboard can be accessed publicly to evaluate and check the distribution of data and gaps within the project. Data used to generate this report is available on the Humanitarian Data Exchange (HDX) webpage and can be accessed at this link: DEEP extracts related to the Sudan 2023 Situational Analyses - Humanitarian Data Exchange.
Figure 22: Distribution of excerpts by sector using the DEEP Analytical Framework
### 0. Context

<table>
<thead>
<tr>
<th>Political</th>
<th>Peace and Security</th>
<th>Socio cultural</th>
<th>Demographic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal and Policy</td>
<td>Economics</td>
<td>Environment</td>
<td></td>
</tr>
</tbody>
</table>

### 1. Conflict

<table>
<thead>
<tr>
<th>Drivers &amp; Aggravating factors</th>
<th>Peacekeeping efforts/Interventions</th>
<th>Conflict Events</th>
<th>Area change of control</th>
<th>Parties to the conflict</th>
</tr>
</thead>
</table>

### 2. Other Events/Shock

<table>
<thead>
<tr>
<th>Type and Characteristics</th>
<th>Drivers and Aggravating factors</th>
<th>Mitigating factors</th>
<th>Hazard and Threats</th>
</tr>
</thead>
</table>

### 3. Displacement

<table>
<thead>
<tr>
<th>Type, # Movement</th>
<th>Push factors</th>
<th>Pull factors</th>
<th>Intentions</th>
<th>Local Integration</th>
</tr>
</thead>
</table>

### 4. Casualties

<table>
<thead>
<tr>
<th>Dead</th>
<th>Injured</th>
<th>Missing</th>
</tr>
</thead>
</table>

### 5. Humanitarian Access

<table>
<thead>
<tr>
<th>Access of affected population to assistance</th>
<th>Access of relief actors to the affected population</th>
<th>Security / physical constraints</th>
<th>People facing humanitarian access constraints</th>
</tr>
</thead>
</table>

### 6. Communication and Information

<table>
<thead>
<tr>
<th>Info channels and means</th>
<th>Info challenges and barriers</th>
<th>Knowledge and Information</th>
</tr>
</thead>
</table>

### 6. Impact

<table>
<thead>
<tr>
<th>Drivers &amp; Aggravating factors</th>
<th>Impact on people</th>
<th>Impact on services and systems</th>
</tr>
</thead>
</table>

### 7. Humanitarian Conditions

<table>
<thead>
<tr>
<th>Living standards</th>
<th>Coping mechanisms</th>
<th>Physical / mental wellbeing</th>
</tr>
</thead>
</table>

### 8. At Risk

<table>
<thead>
<tr>
<th>People at risk/vulnerable</th>
</tr>
</thead>
</table>

### 9. Priorities

<table>
<thead>
<tr>
<th>Priority needs (pop)</th>
<th>Priority needs (Hum.)</th>
<th>Priority interventions (pop)</th>
</tr>
</thead>
</table>

### 10. Capacities / Response

<table>
<thead>
<tr>
<th>Government &amp; local authorities</th>
<th>International actors</th>
<th>National/local actors</th>
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</thead>
</table>

**Figure 23:** Analytical Framework – Operational Environment and Humanitarian Conditions
Annex: Information Sources and Gaps

Overview of the existing data and gaps

The key sources used for each section and critical information gaps are highlighted here to provide an understanding of the information landscape for the Sudan Crisis. In summary:

Sectors:
The information contained in DEEP (see Methodology section), shows how the health sector continues to be the most documented, reflecting the urgency and prevalence of health needs in the crisis. Protection and Food Security follow, indicating a prioritization of immediate survival needs. Livelihoods and Education data are notably scarce, which could point to an oversight in the collection process or the prioritization of more immediate life-saving sectors.

Dimensions of the Analytical Framework:
Information on coping mechanisms and priority needs is very limited, suggesting that the complexities of how communities are managing the crisis may be underreported. The data reflects an acute need for detailed insights into the interventions and the affected population's responses, a gap that mirrors the challenges noted in the previous month's report.

Affected groups:
The DEEP dashboard emphasizes internally displaced persons (IDPs) and affected groups, consistent with humanitarian focus areas. However, there is a continuing deficiency in data regarding host communities, who often face secondary impacts of the crisis, such as resource depletion and social tension.

Groups with specific needs:
The data underrepresents vulnerable groups such as GBV survivors and persons with disabilities. This lack may result in these groups' needs not being fully addressed in the crisis response. The representation of women and children in the data is present but not proportionate to their increased vulnerability in conflict settings.

Sources and gaps by report section
ACLED’s conflict tracking database and regular conflict analysis reports are enhanced by insights from ICG and the Sudan War Monitor, among others. IOM’s DTM and UNHCR provide detailed displacement data through regular reports, interactive dashboards, and datasets. FEWS NET, national and regional media outlets like Ayin Network or Dabanga Sudan, and sporadic assessments in conflict-affected areas or those hosting IDPs cover the socio-political and economic impacts of the conflict. These sources help understand the drivers of both conflict and displacement, as well as provide updates not yet covered in assessments or larger reports. The Aid Worker Security Database (AWSD) records incidents affecting humanitarian workers. Despite these resources, there remains a significant gap in the systematic analysis of humanitarian access restrictions and a notable absence of authoritative maps detailing control areas and up-to-date conflict dynamics.

The Protection sector is primarily covered in quantitative terms by datasets from UNHCR and IOM, as well as ACLED for impacts and details of violent events in the country. Meanwhile, the publication of the HNRP 2024 in December is accompanied by a file with figures on People in Need (PIN) and severity, disaggregated by sector, geographic location, and demography for a detailed analysis, although raw datasets are not provided. Media outlets and national (Radio Tamazuj, Dabanga Sudan) and international portals (CNN, BBC, Al Jazeera) cover the impacts on protection from conflict-related events. Sporadic assessments across the country, as published by NRC, REACH, OCHA provide more detailed insights into the protection risks of vulnerable populations, especially those internally displaced. While UNFPA offers a gender focus in the assessment of the protection situation in Sudan. However, challenges persist due to severely limited humanitarian access, the absence of direct...
beneficiary contact, and the inherent risks of assessing needs in vulnerable contexts. Adding to these challenges are the limited real-time severity assessments of protection issues and psychological distress, coupled with the underreporting of GBV and child protection risks.

In the Food Security and Livelihoods (FSL) sector, quantitative insights from IPC, IOM, OCHA, WFP, FEWSNET, FAO, and NRC outline the severity of food insecurity and the impact of livelihood interventions. The HNRP 2024 details the number of people in need and the levels of food insecurity, while OCHA updates on aid distribution underscore disruptions in food supply chains due to conflict. Challenges remain like limited data on non-agricultural livelihoods and the absence of raw datasets for in-depth analysis. Access issues in regions like Greater Darfur and Greater Kordofan hinder data collection, mirroring previous gaps in localized, updated information, especially at a household level. The reliance on a narrow range of sources highlights a gap in capturing the nuanced effects of conflict on community-level food security and livelihood strategies.

The Nutrition sector remains one of the most limited in terms of available information in Sudan. The nutritional status of the population is primarily recorded and made public by UNICEF, the Health Cluster, WHO, and more recently OCHA with the publication of the HNRP 2024, which specifies the population in need of nutrition assistance. The necessity of conducting these measurements face-to-face and the expertise required for these assessments mean that very few organizations are capable of carrying out these. Other organizations such as Catholic Relief Services, REACH, CARE, IOM through DTM, or OCHA itself in their assessments provide information on the status, functionality, access, and impact on the country's population to nutritional services, mostly internally displaced persons, who are the main subject of these evaluations.

Health: WHO and the Government of Sudan continue to collaborate on the country's epidemiological monitoring, providing real-time dashboards through the Sudan Outbreaks Dashboard, which monitors different outbreaks, daily new cases and deaths, as well as their geographical disaggregation. The Health Cluster and WHO also provide data on the causes of health service dysfunctionality in the country, and the recent HeRAMS report covering 2023 offers an in-depth overview of the health services status from Health Cluster partners in Sudan. Specific assessments, such as those recently conducted by NRC in areas affected by the displacement following clashes in Al Jazira, provide insights into the health needs of these fleeing populations. Insecurity Insight continues to provide data on attacks against health facilities in the country, while the latest HNRP 2024 provides people in need figures as for the other sectors. However, critical data gaps remain, including limited information on overall health system functionality aside from the HeRams report, and insufficient granular data on vaccination coverage.

The Shelter & NFIs sector continues to rely heavily on data provided by the Displacement Tracking Matrix (DTM), which offers information on the living conditions of IDPs, their priorities, and their housing tenure forms. The recent HNRP 2024 provides quantitative data on the population in need in this sector, disaggregated geographically and by affected groups, as well as other demographic details. The loss and damage to housing and shelter infrastructure due to conflict are recorded on news portals or humanitarian situation reports such as Dabanga Sudan, Reuters, Sudan War Monitor, and OCHA. Conditions within the housing and basic services therein are systematically and regularly captured in the DTM, while assessments published by NRC or REACH recently provide some more information, although they lack monitoring that allows for analyzing access to and enjoyment of housing over time. The absence of individual and household-level assessments particularly limits the knowledge of this sector, difficult to evaluate without these data.

The WASH sector has not seen significant updates compared to previous reports, partly due to a limitation it shares with sectors like FSL and Shelter & NFIs, which require household-level evaluations that are currently scarce. Most assessments are conducted through Key Informant Interviews (KIIIs), resulting in a lack of detailed information on access to potable water and its conditions, availability and access to sanitation, showers, or hygiene NFIs, or coping mechanisms related to these. OCHA, through the HNRP, provides People in Need (PIN) data for WASH, though it does not disaggregate by subsectors, while DTM offers brief data on community-level water access. Sporadic rapid assessments like those conducted by REACH in hard-to-reach areas in Darfur,
NRC's recent assessments in settlements in Sennar and Gedaref, or CARE's gender-focused assessment provide some valuable data on water access primarily.

The current report on Sudan's Education sector draws on data from OCHA's HNRP 2024, which provides quantitative insights into the People in Need (PIN) across states and localities, alongside contributions from IOM, the Sudan Education Cluster, Save the Children, and UNICEF. This data outlines the vast number of school-age children out of school due to displacement, with specific figures on internally displaced and cross-border displaced school-aged children. News from Radio Tamazuj and Dabanga Sudan, along with assessments from REACH and NRC, complement these findings by reporting on school closures and the use of educational facilities as shelters. The education sector analysis faces gaps in detailed data on education accessibility, attendance rates, and the operational status of educational centers.
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