

SUDAN - COMPLEX EMERGENCY

FACT SHEET #6, FISCAL YEAR (FY) 2017

SEPTEMBER 30, 2017

NUMBERS AT A GLANCE

4.8 million

People Requiring Humanitarian Assistance in Sudan

HRP - May 2017

2.1 million*

IDPs in Need of Humanitarian Assistance in Darfur HRP - May 2017

230,000*

IDPs in Need of Humanitarian Assistance in the Two Areas HRP - May 2017

629,000

Refugees in Sudan UNHCR - September 2017

461,200

South Sudanese Refugees in Sudan since December 2013 UNHCR - September 2017

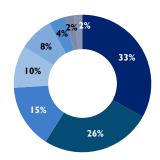
319,600

Sudanese Refugees in Chad UNHCR - July 2017

255,700

Sudanese Refugees in South Sudan UNHCR - August 2017

USAID/OFDA1 FUNDING BY SECTOR IN FY 2017



- Health (33%)
- Water, Sanitation & Hygiene (26%)
- Nutrition (15%)
- Logistics Support & Relief Commodities (10%)
- Humanitarian Coordination & Information Management (8%)
- Agriculture & Food Security (4%)
- Protection (2%)
- Other (2%)

USAID/FFP² FUNDING

BY MODALITY IN FY 2017



- Other (3%)
- Local & Regional Food Procurement (13%)

HIGHLIGHTS

- Flooding causes at least 24 deaths, affects approximately 100,000 people across Sudan
- 2017 HRP receives only 38 percent of requested funding
- An estimated 105,000 people need humanitarian assistance in a newlyaccessible area of Jebel Marra

HUMANITARIAN FUNDING

FOR THE SUDAN RESPONSE IN FY 2017

State/PRM ³ \$256,55	\$41,200,000
USAID/FFP	\$161,343,992
USAID/OFDA	\$54,008,845

KEY DEVELOPMENTS

- Widespread flooding in Sudan had resulted in at least 24 deaths, damaged or destroyed nearly 20,000 houses, and affected approximately 100,000 people as of mid-September. In response, the Government of Sudan (GoS) and relief agencies have provided emergency shelter assistance and relief commodities to approximately 42,000 floodaffected people across eight states.
- Between August 2016 and September 2017, health actors recorded nearly 34,000 cases of acute watery diarrhea (AWD) and approximately 770 related deaths in Sudan, according to the UN World Health Organization (WHO) and the GoS. Although the weekly AWD caseload declined in recent months, AWD transmission remains ongoing across Sudan.
- The U.S. Government (USG) provided more than \$256 million in humanitarian assistance for the emergency response in Sudan during FY 2017, including approximately \$54 million from USAID/OFDA, more than \$161 million from USAID/FFP, and more than \$41 million from State/PRM.
 - 1 USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)
 - ² USAID's Office of Food for Peace (USAID/FFP)
 - ³ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

^{*} The UN estimates an additional 500,000 IDPs reside in host communities and settlements in Darfur, while armed actors report that an additional 545,000 IDPs reside in parts of the Two Areas under their control.

CURRENT EVENTS

- As of mid-September, heavy rainfall during the June—September rainy season had generated widespread flooding in Sudan, resulting in at least 24 deaths, affecting approximately 100,000 people, destroying more than 9,300 houses, and damaging an additional 10,600 homes, according to the GoS and relief agencies. While 16 of Sudan's 18 states have sustained flood-related damage, Al Gezira, Kassala, North Darfur, South Darfur, West Darfur, and White Nile states are the worst affected. The GoS is leading emergency response efforts and has activated federal- and state-level flood task forces, which comprise representatives from the GoS, UN agencies, non-governmental organizations (NGOs), and the Sudanese Red Crescent Society.
- The GoS and relief organizations have identified priority needs for flood-affected populations, including emergency shelter materials and relief commodities, as well as food, health care services, and water, sanitation, and hygiene (WASH) supplies. As of September 19, humanitarian actors had provided emergency shelter and relief supplies to approximately 42,000 people across eight states, with additional food, health, and WASH interventions in North Darfur and South Darfur. Response gaps persisted as of mid-September, particularly in South Darfur and White Nile, where more than 22,000 people were in need of emergency assistance.
- From August 27–29, USAID Administrator Mark A. Green traveled to the capital city of Khartoum, as well as North Darfur's El Fasher town and Zam Zam internally displaced person (IDP) site, to observe humanitarian conditions and USAID-supported activities in Sudan. During the visit, Administrator Green met with GoS authorities, displaced populations, and UN and NGO humanitarian partners to discuss current security and humanitarian assistance trends, including humanitarian access improvements in areas of Darfur Region. Administrator Green also assessed efforts by national and regional GoS authorities to facilitate humanitarian access in Sudan.
- UN Resident and Humanitarian Coordinator (RC/HC) Marta Ruedas issued a statement on September 19 highlighting the low level of humanitarian funding for emergency operations in Sudan in 2017. As of September 30, international donors had contributed more than \$303 million—nearly 38 percent—toward the 2017 Humanitarian Response Plan (HRP) for Sudan. Food security and livelihoods activities face the largest funding gap, with donors providing \$11.6 million—5.6 percent—of the more than \$209 million requested by the 2017 HRP. Health funding gaps in Blue Nile and South Kordofan states and Darfur have reduced access to primary health care services for an estimated 637,000 people. Furthermore, the UN Humanitarian Air Service (UNHAS) has only received funding to enable operations through November 2017; disruptions to UNHAS activities could jeopardize life-saving emergency interventions in hard-to-access areas of Sudan.

DARFUR

- An estimated 105,000 people in South Darfur's Deribat town and surrounding areas are in need of humanitarian assistance, according to an interagency humanitarian assessment that occurred from September 10–15. The visit was the first in several years to Deribat, which is located in a newly accessible area of Jebel Marra—a mountainous region encompassing parts of Central Darfur, North Darfur, and South Darfur states. The total population in need includes approximately 62,000 host community members, an estimated 42,000 IDPs, and 1,000 returnees. The assessment team identified critical gaps in health and nutrition assistance, with only one functioning health center in the area and more than 19,000 children requiring nutrition support. In response, relief agencies plan to scale-up primary health care services, nutrition interventions, and health education efforts in Deribat, the UN reports.
- On September 22, the UN reported that GoS security forces clashed with IDPs at South Darfur's Kalma IDP site, resulting in five IDP deaths and injuring at least 26 people. Kalma is one of the largest displacement sites in Sudan, and GoS forces were reportedly attempting to disperse an IDP demonstration against an upcoming visit by GoS President Omar al-Bashir, according to local media. The African Union–UN Hybrid Operation in Darfur (UNAMID) issued a press release on September 22, expressing concern about the incident and calling for all actors to exercise restraint. A UNAMID medical team assisted local authorities to treat injured persons at Kalma, and UNAMID representatives are engaging with state officials and IDP leadership to reduce tensions at the site.

• In FY 2017, USAID/OFDA provided approximately \$43.4 million in humanitarian assistance to UN agencies and NGO partners to deliver multi-sector humanitarian assistance—including emergency health, nutrition, and WASH interventions—to conflict-affected and vulnerable populations across Darfur.

FOOD SECURITY AND NUTRITION

- While most of Sudan experienced heavy seasonal rainfall from June–September, July dry spells in eastern and northern
 areas of North Darfur, North Kordofan, West Darfur, and northern parts of Gedaref and Kassala states delayed crop
 planting and caused newly-germinated seedlings to wilt, resulting in below-average vegetation conditions, according to
 the USAID-funded Famine Early Warning Systems Network (FEWS NET). Heavy rainfall in August improved crop
 conditions, but also resulted in severe flooding, water logging, and property damage.
- October/November harvests across much of Sudan are expected to improve food security to Minimal—IPC 1—or
 Stressed—IPC 2—levels through January 2018, as staple food prices decline and agricultural labor opportunities
 become more prevalent.⁴ Despite overall projected improvements in food security, vulnerable households—including
 IDPs in Blue Nile, South Kordofan, and West Kordofan states and Darfur, as well as South Sudanese refugees—are
 expected to face Crisis—IPC 3—level acute food insecurity through January 2018, with protracted displacement
 limiting seasonal agricultural labor opportunities and access to land for cultivation.
- USAID partner the UN Children's Fund (UNICEF) continues to provide emergency assistance to acutely
 malnourished children in Jebel Marra, where assessments in early-to-mid 2017—enabled by recent improvements in
 humanitarian access—revealed alarming nutrition conditions, including severe acute malnutrition (SAM) levels
 exceeding 5 percent in several areas. Since June, UNICEF has screened more than 111,000 children younger than five
 years of age for acute malnutrition and treated more than 6,500 children facing SAM. Countrywide, UNICEF reports
 treating more than 127,000 children experiencing SAM and providing infant and young child feeding counseling to
 more than 420,000 mothers and caregivers to date in 2017.
- USAID/FFP recently provided approximately 2,600 metric tons (MT) of U.S. in-kind food assistance, valued at \$5.5 million, to the UN World Food Program (WFP) to deliver emergency interventions across Sudan. In FY 2017, USAID/FFP provided more than \$167 million to support humanitarian assistance for approximately 2.5 million conflict-affected and vulnerable people in Sudan. USAID/FFP partners enabled delivery of 160,000 MT of U.S. in-kind and locally and regionally procured food commodities, as well as provision of market-based assistance, such as food vouchers and cash-based transfers for food.

HEALTH AND WASH

- Between August 2016 and September 8, 2017, the GoS and WHO recorded nearly 34,000 AWD cases in Sudan, including more than 770 related deaths. As of late September, AWD transmission remained ongoing across Sudan, and Gezira, Sennar, and White Nile were the most affected states, according to the GoS and WHO. In coordination with UNICEF, WHO, and other relief agencies, the GoS is bolstering public health services; improving AWD case management; delivering medicine and medical supplies; ensuring adequate water quality; and promoting safe sanitation and hygiene practices in affected communities. In FY 2017, USAID/OFDA provided a total of \$9.8 million to support UNICEF and WHO emergency operations in Sudan, including multi-sector humanitarian interventions and AWD response activities.
- In August, USAID/OFDA partner Relief International (RI) supported emergency health interventions for more than 4,600 IDPs in North Darfur's Zam Zam IDP site. The assistance included information sessions on breastfeeding and complementary feeding best practices, food ration preparation, and hygiene promotion. In FY 2017, RI provided health, nutrition, and WASH assistance to displaced and vulnerable populations across North Darfur.

⁴ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal—IPC I—to Famine—IPC 5.

REFUGEE MOVEMENTS

• Populations in South Sudan continue to flee conflict and acute food insecurity, with more than 183,000 South Sudanese refugees arriving in Sudan between January and mid-September, according to the Office of the UN High Commissioner for Refugees (UNHCR). To date in 2017, White Nile has received the largest number of new refugee arrivals, more than 59,000 people, followed by East Darfur with approximately 46,000 new refugee arrivals. Relief agencies anticipate that up to 17,000 additional South Sudanese refugees could arrive in Sudan by late 2017. Overall, approximately 447,300 people have fled to Sudan since conflict erupted in South Sudan in December 2013.

OTHER ASSISTANCE

On September 1, the UN allocated an additional \$21 million in emergency funding through the Sudan Humanitarian
Fund and the UN Central Emergency Response Fund—a pooled humanitarian fund established and managed by the
UN to support sudden-onset and underfunded emergencies—to support humanitarian operations in Jebel Marra and
Blue Nile and South Kordofan. The UN reports that the AWD outbreak and the continued influx of South Sudanese
refugees have strained available resources and reduced access to basic services in these vulnerable areas.

CONTEXT

- Since 2003, the complex emergency in Darfur has affected more than 4.7 million people, including more than
 1.2 million long-term IDPs who remain in camps, according to the UN. Conflict continues among the Sudanese Armed Forces, armed opposition groups, militias, and ethnic groups.
- Insecurity, access restrictions, and bureaucratic impediments limit the ability of relief agencies to respond to humanitarian and recovery needs. Since late 2016, GoS actions have led to meaningful improvements in humanitarian access and enabled relief organizations to deliver assistance to vulnerable populations in previously inaccessible areas of the country, including in Jebel Marra. Despite improvements, relief agencies continue to face a challenging operating environment in Sudan.
- On July 14, 2011, the GoS and the Liberation and Justice Movement, an armed opposition group in Darfur, signed the Doha Document for Peace in Darfur, a framework for establishing a comprehensive peace process in Darfur.
- The January 2005 signing of the Comprehensive Peace Agreement (CPA) between the GoS and the southern-based Sudan People's Liberation Movement officially ended more than two decades of North–South conflict during which famine, fighting, and disease killed an estimated 2 million people and displaced at least 4.5 million others. In accordance with the CPA, the 10 states of Southern Sudan conducted a referendum on self-determination on January 9, 2011, which resulted in the independence of the Republic of South Sudan on July 9, 2011. Between the signing of the CPA and the independence of South Sudan, more than 2 million IDPs and 331,000 refugees returned to South Sudan, Abyei, and the Two Areas of Blue Nile and South Kordofan, according to UNHCR.
- Sudan continues to cope with the effects of conflict, economic shocks, and perennial environmental hazards, such
 as drought and flooding. On October 2, 2016, U.S. Chargé d'Affaires, a.i., Ervin Massinga renewed the disaster
 declaration for the complex emergency in Sudan for FY 2017. The U.S. Mission in Sudan has declared disasters
 due to the complex emergency annually since 1987.

USG HUMANITARIAN FUNDING FOR THE SUDAN RESPONSE IN FY 2017

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT		
	USAID/OFDA Funding in Darfur ²				
NGO and International Organization Partners**	Agriculture and Food Security, Economic Recovery and Market Systems (ERMS), Health, Monitoring and Evaluation, Nutrition, Shelter and Settlements, WASH	Darfur-wide	\$27,003,937		
UN Food and Agriculture Organization (FAO)	Agriculture and Food Security, Humanitarian Coordination and Information Management	Central Darfur	\$500,000		
International Organization for Migration (IOM)	Health, Logistics Support and Relief Commodities, Nutrition, Protection, WASH	Darfur-wide	\$2,065,000		
UN Office for the Coordination of Humanitarian Affairs (OCHA)	Humanitarian Coordination and Information Management	Darfur-wide	\$950,000		
UN Development Program (UNDP)	Humanitarian Coordination and Information Management	Darfur-wide	\$150,000		
UN Department for Safety and Security (UNDSS)	Humanitarian Coordination and Information Management	Darfur-wide	\$1,000,000		
UNICEF	Health, Nutrition, Protection, WASH	Darfur-wide	\$4,500,000		
UNHAS	Logistics Support and Relief Commodities	Darfur-wide	\$4,110,000		
WHO	Health, Humanitarian Coordination and Information Management	Darfur-wide	\$3,100,000		
TOTAL USAID/OFDA FUND	ING IN DARFUR		\$43,378,937		

USAID/OFDA Funding in the Three Areas ³ and Central and Eastern Sudan			
NGO and International Organization Partners**	Agriculture and Food Security, ERMS, Health, Logistics Support and Relief Commodities, Nutrition, Protection, WASH	Blue Nile, South Kordofan, West Kordofan	\$4,396,839
FAO	Agriculture and Food Security, Humanitarian Coordination and Information Management	Blue Nile, South Kordofan	\$500,000
IOM	ERMS, Health, WASH	Abyei	\$500,000
ОСНА	Humanitarian Coordination and Information Management	Three Areas-wide, Central and Eastern Sudan	\$600,000
UNDP	Humanitarian Coordination and Information Management	Three Areas-wide, Central and Eastern Sudan	\$400,000
UNICEF	Health, Nutrition, Protection, WASH	Three Areas-wide, Central and Eastern Sudan	\$1,700,000
UNHAS	Logistics Support and Relief Commodities	Three Areas-wide, Central and Eastern Sudan	\$190,000
UN Mine Action Service (UNMAS)	Protection	Blue Nile, South Kordofan	\$500,000
WHO	Health, Humanitarian Coordination and Information Management	Three Areas-wide, Central and Eastern Sudan	\$500,000
	Program Support		\$1,343,069
TOTAL USAID/OFDA FU	NDING IN THE THREE AREAS AND CENTR	AL AND EASTERN SUDAN	\$10,629,908

USAID/FFP4			
WFP, UNICEF, and Implementing Partners	160,000 MT of In-Kind Emergency Food Assistance; Local and Regional Food Procurement; Cash Transfers for Food; Food Vouchers; Nutrition Commodities	Countrywide	\$161,343,992
TOTAL USAID/FFP FUN	DING		\$161,343,992

State/PRM Funding in Sudan			
Multi-Sector Assistance, Protection	Countrywide	\$1,100,000	
Logistics Support and Relief Commodities	Countrywide	\$1,000,000	
Multi-Sector Assistance, Protection	Countrywide	\$39,100,000	
NG IN SUDAN		\$41,200,000	
	Multi-Sector Assistance, Protection Logistics Support and Relief Commodities Multi-Sector Assistance, Protection	Multi-Sector Assistance, Protection Countrywide Logistics Support and Relief Commodities Countrywide Multi-Sector Assistance, Protection Countrywide	

TOTAL USG HUMANITARIAN FUNDING FOR THE SUDAN RESPONSE IN FY 2017	\$256,552,837
TOTAL STATE/PRM FUNDING FOR THE SUDAN RESPONSE	\$41,200,000
TOTAL USAID/FFP FUNDING FOR THE SUDAN RESPONSE	\$161,343,992
TOTAL USAID/OFDA FUNDING FOR THE SUDAN RESPONSE	\$54,008,845

^{**} USAID/OFDA funding in FY 2017 supports the following NGO partners in Sudan: American Refugee Committee (ARC), Adventist Development and Relief Organization (ADRA), CARE, Catholic Relief Services (CRS), Concern, GOAL, International Medical Corps (IMC), Mercy Corps, Near East Foundation (NEF), RI, Save the Children/U.S. (SC/US), United Methodist Committee on Relief (UMCOR), Vétérinaires Sans Frontières/Germany (VSF/G), World Relief International (WRI), World Vision

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at www.interaction.org.
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed (often in the affected region); reduce the burden on scarce resources (such as transportation routes, staff time, and warehouse space); can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org or +1.202.661.7710.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. ² USAID/OFDA funding represents actual or obligated amounts as of September 30, 2017.

³ Abyei Area, Blue Nile, and South Kordofan.

⁴ Estimated value of food assistance and transportation costs at time of procurement; subject to change.