

# **EMERGENCY OVERVIEW: DISPLACEMENT**

# **AUGUST 2024**

# Crisis in Sudan

# Largest Internal Displacement Emergency in The World

Despite significant operational challenges, Catholic Relief Services and our partners continue to provide emergency and resilience programming to 1.1 million people, many of them children.





Farmer Daralsalam Yahya is part of a CRS savings and internal lending communities, or SILC, group in a village in West Darfur, Sudan. As a CRS program participant, she received seeds, tools, and training in farming techniques and nutrition. Photo by Carlos Barrio/CRS

## Overview

A humanitarian crisis is worsening across Sudan as conflict disrupts life, deepens hunger levels and displaces millions of people. Armed conflict erupted across the country in mid-April 2023, with fighting concentrated in the capital of Khartoum and in cities across Darfur and Kordofan states. More than 10.5 million people have been displaced—7.7 million internally and 2.8 million as refugees to neighboring countries.<sup>1</sup>

Across the country, 25.6 million people—more than half the population—face severe food shortages. Some 730,000 children are projected to suffer severe acute malnutrition this year. Hunger has reached dangerous levels in some hard-to-reach areas of Darfur. The conflict has taken a heavy toll on infrastructure and limited people's access to water, health care, and other goods and services.

10.5 million

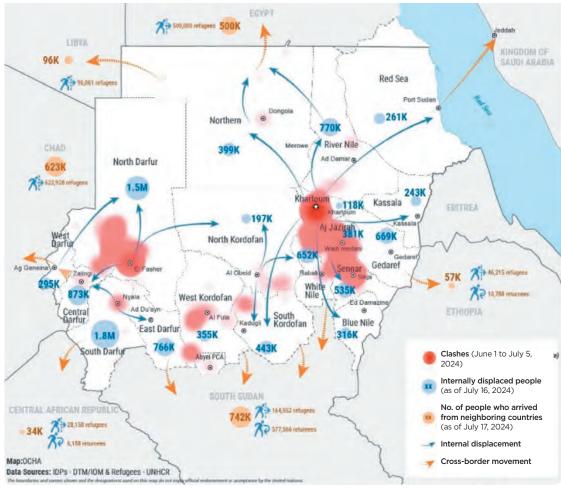
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1. IOM. June 25, 2024. Displacement Tracking Matrix: Sudan

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#### Sudan: Clashes, Internal Displacement and Cross-Border Movement



Source: OCHA. Sudan Humanitarian Update (29 July 2024).

# 14 million

CHILDREN NEED
LIFESAVING
ASSISTANCE,
THE HIGHEST
RECORDED
NUMBER IN THE
COUNTRY'S
HISTORY

Among the most affected areas are
Al Fasher locality in North Darfur,
Khartoum, South Darfur and Central
Darfur. More than half of the displaced are
children. As many as 14 million children
need lifesaving assistance.

Limited access to people in need is a critical constraint in providing lifesaving assistance. About 1.78 million people—mainly in Darfur, Kordofan and Khartoum states—have not received crucial humanitarian aid due to violence, travel delays, and significant logistical and communications challenges.

The World Health Organization reports that two-thirds of the main hospitals in affected areas are non-operational. Those that are functioning are at risk of closure due to shortages of medical staff, supplies, safe water and electricity. Healthcare facilities, medical warehouses, transportation of supplies and health workers are being targeted in the conflict. Even before this conflict escalated, communities across the

country had faced heightened needs due to intercommunal violence, typically among farming and livestock communities.

## **CRS and Partner Response**

Despite significant operational challenges, CRS continues to provide emergency and resilience programming across 32 localities in Sudan, notably in East Darfur, West Darfur, Central Darfur, Khartoum, Red Sea and Gedarif states. Since September 2023, CRS has supported 1.1 million people with food, health care, nutrition, child protection, education, social cohesion activities, livelihoods, and water, sanitation and hygiene.

Given the regional impacts of this crisis, CRS is also working with partners to provide relief to Sudanese refugees in Egypt, Chad and South Sudan. Priorities include food, cash assistance, agriculture and livelihood support, shelter and living supplies, water, sanitation and hygiene, health and nutrition support, peacebuilding activities and counseling support.

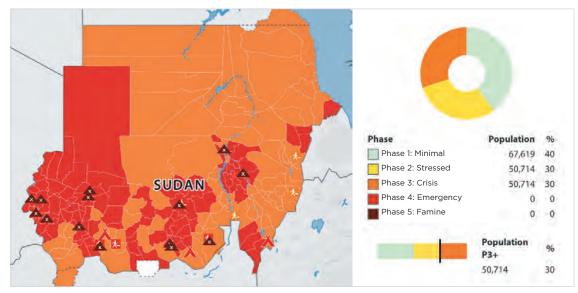


Father of eight Mohammed Adam Juma fled to Mornei in West Darfur because of conflict. He trades sugar, keeps goats and makes mud bricks. Photo by Carlos Barrio/ CRS

Before the conflict started, I was a farmer and had a normal life.
Because I earn very little from trading in the market, I need support from CRS to keep my children in school.

**Mohammed Adam Juma,** Project participant, Mornei, West Darfur

# Sudan Projected Food Insecurity: June 2024 to Septempter 2024



Source: IPC. Sudan: Acute Food Insecurity Situation for April - May 2024 and Projections for June - September 2024 and October 2024 - February 2025.

Highlights of CRS programming include:

#### **EMERGENCY RESPONSE**

# Food security and livelihoods

- Reached 288,701 people through food assistance programs in partnership with the World Food Program, the USAID Bureau for Humanitarian Assistance, the Darfur Emergency Response Activity, and 157 emergency response rooms, informal structures composed of community volunteer rapid responders.
- Assisted 175,181 people in West Darfur, Central Darfur and Red Sea states with 9,361 metric tonnes of food and supplements in coordination with WFP.
- Assisted 115,067 people across
   Khartoum state with soup kitchens and food baskets.
- Prioritize cash and voucher assistance for people to buy food and critical supplies (where markets are functional and accessible).
- Train school-feeding providers in healthy food handling, quality assurance and control, and vegetable gardening.
- Provide livelihoods support where appropriate, including linking people to business skills training, financial services and investment opportunities.
- Provide supplies and tools to start up and expand agricultural and off-farm income-generating activities, and promote early recovery and resilience where possible in more stable areas of Sudan.

- Train veterinarians and those engaged with animal health extension services.
   Distribute bicycles to community animal health workers.
- Support Savings and Internal Lending Communities to build their individual and collective financial assets.

#### Health

- Provide emergency health and nutrition services that focus on nutrition screening for children under 5 years, and pregnant and breastfeeding women.
- Distribute ready-to-use therapeutic foods and supplementary foods for malnourished children.
- Support mobile clinics and rural health facilities to ensure people's access to basic health services.
- Strengthen the capacity of health facilities to provide treatment, immunization and medical care including for pregnant women and new mothers—and training for health facility workers and pharmacists.
- Promote good nutrition practices. Strengthen the capacity of nutrition staff, mother support groups, and malnutrition preventative efforts.
- Train community health management committees to strengthen their capacity to support health facilities within their area.

A CRS staff member addresses a village community in West Darfur, Sudan. CRS aims to meet emergency food security needs, strengthen social cohesion, and build resilience among vulnerable communities in Darfur. Photo by Carlos Barrio/CRS



## Water, sanitation and hygiene (WASH)

- Ensure access to drinking water through water trucking and provision of fuel for motorized pumps at water stations.
- Promote WASH in health facilities that serve vulnerable and crisis-affected communities.
- Support health centers to improve their WASH infrastructure through rehabilitation and repair of water points and latrines.
- Provide families with kits of essential items and materials to practice healthy WASH behavior. Promote good WASH practices during distributions.
- Construct or rehabilitate water points and sanitation systems, including drilling wells and installing boreholes and handpumps.
- Train staff on water treatment and management, and organize cleaning campaigns with solid waste management committees across communities.

# Psychosocial support and safe and dignified programming

- Provide counseling and other support for children and young people, including establishing school clubs, to address the unique issues and risks facing children in displaced contexts.
- Train social workers, teachers and parents to recognize and refer protection issues.

#### Social cohesion

- Establish and strengthen the peacebuilding conflict management capacity of local communities.
- Encourage community action groups to co-manage issues around the control of, and access to, natural resources.
- Train community members in conflict resolution skills and social cohesion.
- Support the establishment of youth and women's groups to strengthen social cohesion in their communities.

#### **CRS in Sudan**

CRS began serving communities in need in Sudan in 1978. After relocating to what is now South Sudan in 1982, CRS reopened our offices in Sudan in 2004. Today, CRS has 200 national staff and 12 offices, and operates in 32 localities.

CRS works with local and international partners to implement programming in some of Sudan's most hard-to-reach areas across the five Darfur states, and in eastern Sudan. CRS has been active in responding to emergencies, supporting people's recovery after conflict, and promoting long-term resilience. The crisis in Sudan requires a well-coordinated, rapid and robust humanitarian response to save lives, reduce suffering, build resilience, and support social cohesion and peacebuilding. CRS and our local partners are working to address both urgent and longer-term needs.

