



SUDAN

COUNTRY REFUGEE RESPONSE PLAN

January – December 2023



FRONT COVER PHOTOGRAPH:

Freweyni prepares a traditional Habesha coffee at her coffee shop in Tunaydbah refugee camp in Sudan. She fled her home in Tigray following the recent conflict in Ethiopia, which broke out in 2020.

Photo: UNHCR/Samuel Otieno



This document and further information are available on the UNHCR data portal Sudan page. Please click on the following link <https://data.unhcr.org/en/country/sdn> or scan the QR code.

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A word from the Refugee Coordinator

In 2022, Sudan continued to keep its doors open to people fleeing conflict and persecution and UNHCR estimates that 926,000 refugees and asylum-seekers will live in Sudan by the end of 2023. While conflict in Ethiopia and South Sudan has forced people to cross the border into Sudan over the last years, Eritrean refugees started arriving decades ago constituting one of the most protracted refugee situations worldwide. Sudan also hosts refugees from Syria, the Central African Republic and Chad.

Sudan's policy to grant asylum to forcibly displaced is especially commendable given the multiplicity of challenges the country faces. While emerging from the adverse impacts of the COVID-19 pandemic, the country faces an economic hardship with high inflation rates that impact the cost of living for Sudanese and refugees alike. Climate-related hazards, some of which are increasing in frequency and magnitude, such as flooding that regularly inundates large swathes of land and destroys people's shelters, livelihoods and possessions are coupled with frequent disease outbreaks. Inter-communal tension and civil unrest, adds a further strain on public service provision and reduces access to basic services.

Despite these challenges the Government of Sudan has made important commitments to achieve durable solutions for refugees through pledges made at the Global Refugee Forum, and its active engagement within the Intergovernmental Authority on Development (IGAD) Solutions Initiative through which Sudan together with the Government of South Sudan is seeking to find solutions for displaced populations including refugees, IDPs, returnees and host communities.



The Sudan Country Refugee Response Plan in 2023 brings together 41 partners including UN agencies, international and national NGOs, and the Sudanese Red Crescent, to respond to the most urgent needs of refugees and asylum-seekers in Sudan. UNHCR and partners urgently need US\$ 556M to alleviate the suffering of refugees in Sudan while working on lasting solutions.

Axel Bisschop

UNHCR Representative in Sudan



At a Glance

Sudan Planned Response

January-December 2023



926,245

Projected refugee population by end 2023



230,000

Assisted host-community members



USD

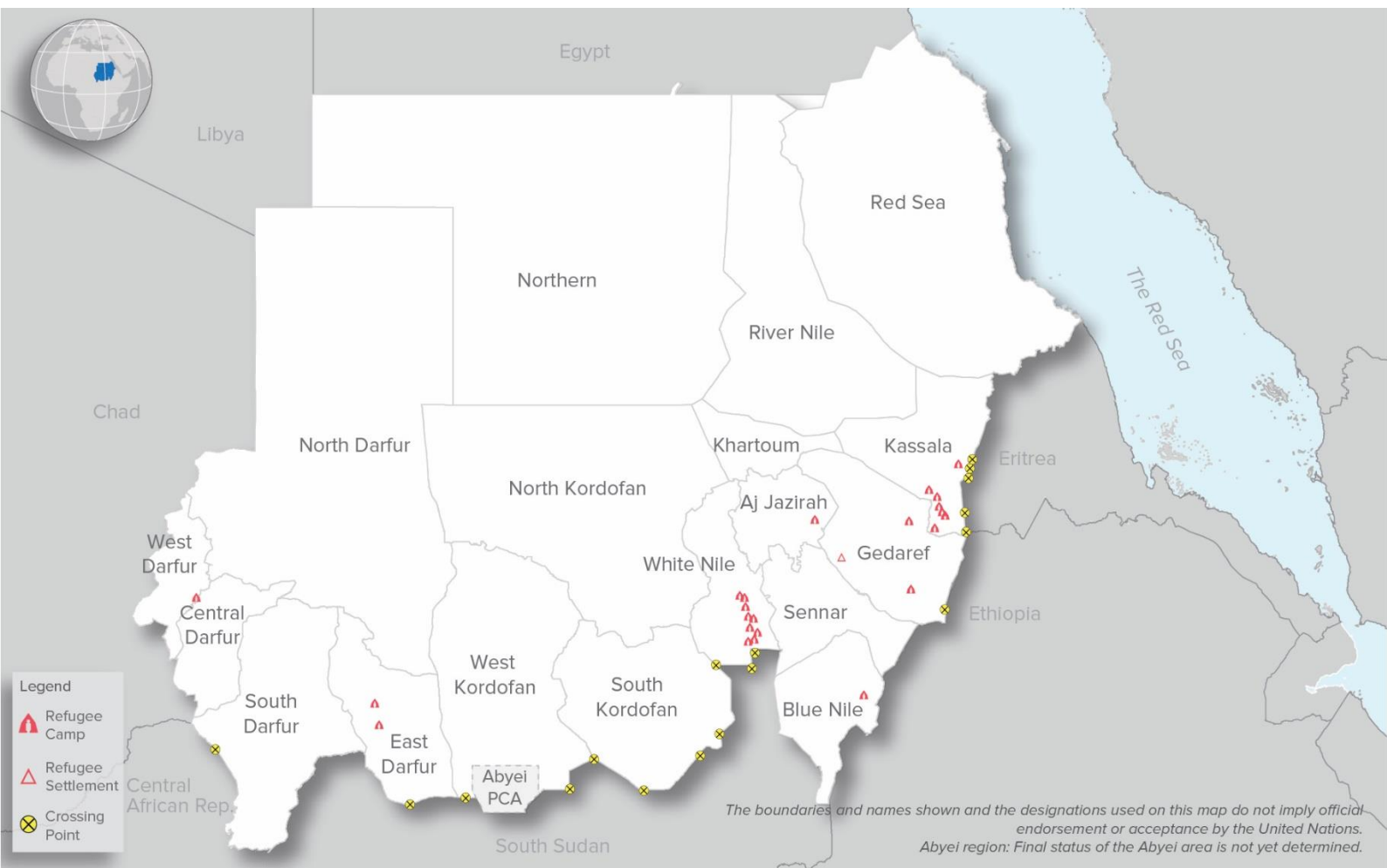
556 M

Total financial requirements



41

Partners involved



Country Overview

Executive Summary

Under the co-leadership of the Sudan Commission for Refugees (COR) and UNHCR, the Sudan CRP provides strategic guidance to the inter-agency refugee response, lays out the refugee coordination structure and estimates the financial requirements to respond to the identified needs. It provides a platform for facilitating partnerships that combine and leverage resources by working together in a transparent, respectful, and mutually beneficial way according to the Principles of Partnership of the Global Humanitarian Platform. Refugee response coordination follows the UNHCR Refugee Coordination Model (RCM) and works alongside and in complementarity with the Inter-Agency Standing Committee (IASC) coordination structure under the Humanitarian Coordinator as outlined in the Joint UNHCR – OCHA Note on Mixed Situations. The Sudan country refugee response is also highlighted in the Sudan Humanitarian Response Plan (HRP), which includes a dedicated chapter on refugees led by UNHCR. The response to South Sudanese refugees hosted in Sudan is also reflected in the South Sudan Regional Refugee Response Plan in a dedicated country chapter.

With almost 1 million refugees, Sudan hosts the second highest number of refugees in Africa and the country has provided protection for refugees and asylum-seekers from South Sudan, Eritrea, Ethiopia, Central African Republic (CAR), Chad, Syria, Yemen, and other countries (such as Somalia and the Democratic Republic of Congo (DRC)) since 1965. While some refugees, such as the Ethiopians fleeing the conflict in Tigray, arrived recently, others, such as the Eritreans, fled their home country decades ago. Additionally, Sudan is one of the main hosting countries for South Sudanese refugees, with currently over 800,000 persons in the country. Khartoum and White Nile States continue to host together more than half of all refugees in Sudan.

Refugee affairs are governed by the Government of Sudan (GoS) according to its Asylum (Organization) Act 2014. As Sudan follows an encampment policy, approximately 38 per cent of Sudan's refugee populations live in 25 camps across the country, mostly in Kassala, Gedaref, White Nile and East Darfur. The remaining 62 per cent live outside of camps, amid local communities that are hosting refugees in towns and villages. This includes refugees in urban areas, including the "open areas" outside of Khartoum, and more than 100 settlements across the country, including large collective self-settlements where thousands of refugees live in "camp-like" areas adjacent to reception centres, as well as smaller dispersed settlements where refugees live integrated with host communities. Many out-of-camp settlements are in remote and underdeveloped areas, where resources, infrastructure and basic services are extremely limited.



More than 2,000 refugees, aged 6 to 19, study at the Khôr Alwara Primary School in White Nile State, Sudan. Photo: UNHCR/Mohamed Rached Cherif

Sudan continues to explore durable solutions for displaced populations. This is evidenced by the GoS continued commitments on several fronts including the implementation of the Juba Peace Agreement (JPA), the nine pledges made during the Global Refugee Forum (GRF) in 2019¹, the Sustainable Development Agenda, and its chairmanship of Intergovernmental Authority on Development (IGAD) under which the Governments of Sudan and South Sudan are currently leading a comprehensive solutions initiative for displaced populations including refugees, IDPs, returnees and host communities. Noteworthy, the pledges made at the GRF reflect a commitment to an approach aligned with UNHCR's Comprehensive Refugee Response Framework (CRRF) through mainstreaming refugee health and education services into national systems and supporting self-reliance, access to employment and freedom of movement.

However, despite being at a critical crossroads in terms of potential for achieving durable solutions for forcibly displaced populations, Sudan continues to receive people fleeing conflict, food insecurity, climate shocks and lack of basic services and livelihood opportunities in their countries of origin. Additionally, for most refugees, voluntary return remains elusive due to the situation in their countries of origin and resettlement opportunities are limited.

Sudan is also a source, transit, and destination country for mixed movements of refugees, asylum-seekers, and migrants across the sub-region towards Europe (mainly through the Central Mediterranean route) and other destinations. In August 2021 the GoS launched its 2021 – 2023 National Action Plan (NAP) to Combat Human Trafficking to coordinate the efforts to prevent trafficking and provide protection and assistance to victims of trafficking in Sudan.

Despite new and protracted displacement, the country continues to face a number of additional challenges including entrenched high annual inflation rates of 149 per cent (June 2022), globally rising prices of food items and petrochemical goods in part due to the war on Ukraine, annual flooding during the rainy season destroying public and private infrastructure, the continuous impact of the COVID-19 pandemic and other disease outbreaks compounded by regional dry spells that are stretching the country's coping mechanisms to their limits. These challenges have further impacted public service delivery and increased the socio-economic vulnerability of displaced populations and host communities in Sudan, including refugees. Recent surveys have shown that refugees face higher levels of unemployment, reduced income and lower levels of education compared to host communities. This situation disproportionately affects women and girls, who usually bear the brunt of harmful coping strategies.

The military takeover on 25 October 2021 and subsequent developments have changed the political landscape in the country. While economic hardship and public unrest is expected to continue in 2023 negotiations with all actors are being facilitated to find a path to a civilian led government and free and fair elections. The political uncertainty is expected to affect the implementation of the GRF pledges and will likely cause delays. Further, it will have an impact on the ability of humanitarian partners to implement their programmes.

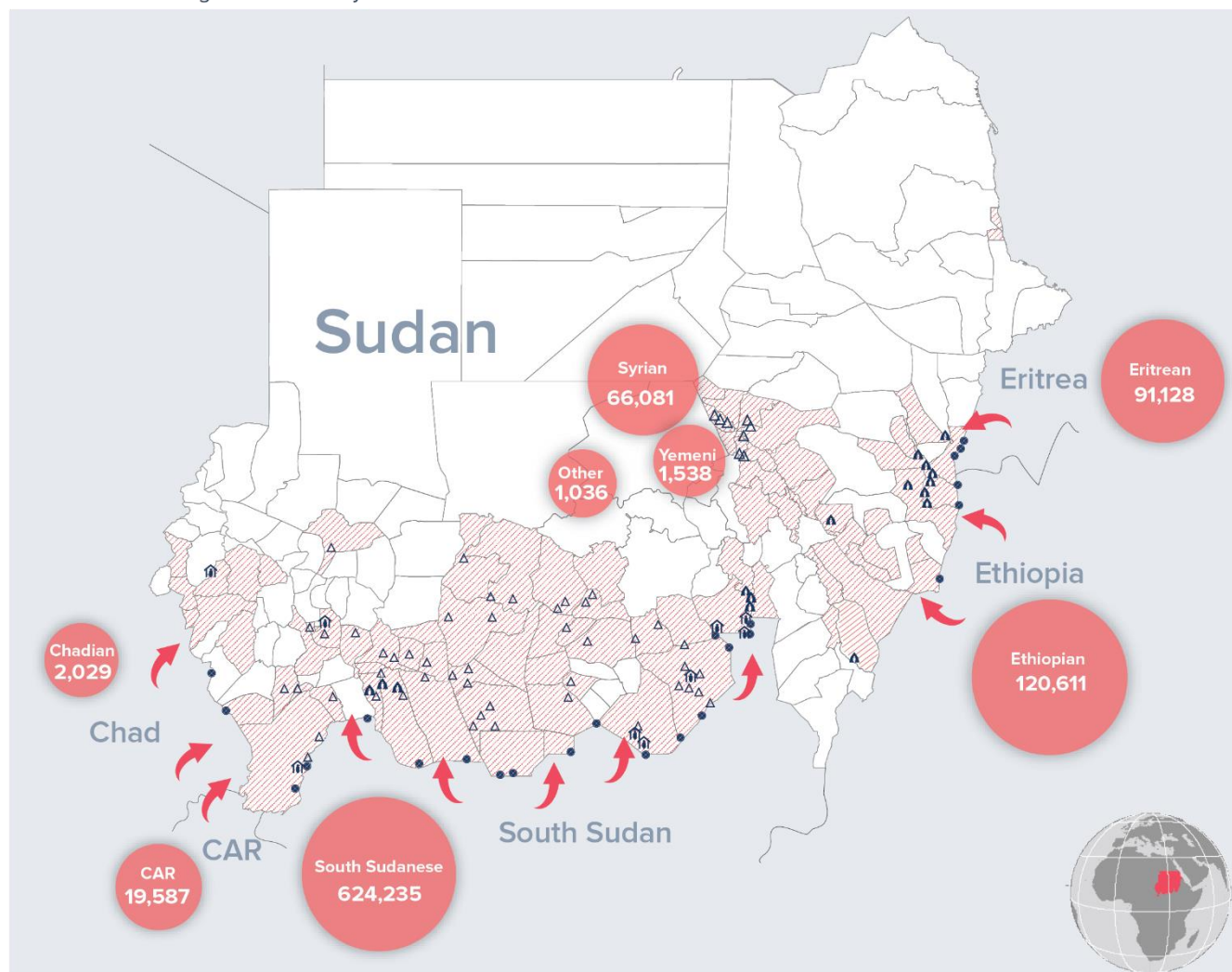
Refugees in Sudan need multi-sectoral interventions to address their specific vulnerabilities, bolster their self-reliance over the long term, and maintain and fulfil their rights as refugees, requiring also that asylum space and access to basic and specialized protection services are maintained. This further includes prevention, risk mitigation, and response to child protection and GBV. Investments in local infrastructure and strengthening of gender-sensitive education, health,

¹ [Pledges & Contributions | The Global Compact on Refugees | UNHCR \(globalcompactrefugees.org\)](#)

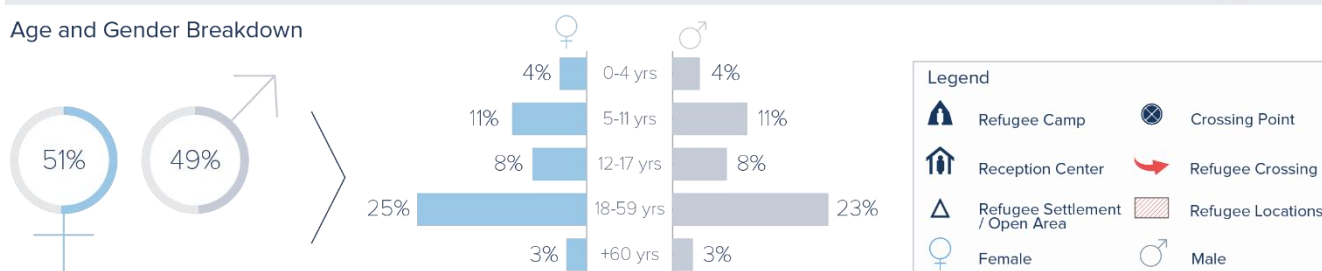
SUDAN COUNTRY REFUGEE RESPONSE PLAN

nutrition, energy and environment, and water, sanitation, and hygiene (WASH) services are also needed to ensure that local service systems have the capacity to absorb the increasing needs of refugees and host communities. Engagement with development actors and advocacy for investments capable of strengthening national systems further enable social cohesion and peaceful coexistence, benefiting refugees and citizens alike, and allowing both communities to thrive.

Estimated total refugees in Sudan by the end of 2023



Age and Gender Breakdown



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

The above figures are UNHCR projections for 2023 refugee populations in Sudan, utilizing past trends from the first half of 2022 to account for prospective arrivals, natural population growth rates, morbidity rates, and departures. It should be noted that for Ethiopian refugee figures, trends projections were completed prior to the cessation of hostilities in Tigray agreement and correspond to HNO/HRP planning figures. Figures will be reviewed and adjusted in 2023.



Shelter distribution in South Darfur for new arrivals from the Central African Republic and South Sudan. Photo: UNHCR/Behrooz Taleb

Part 1: Current Situation

Situation Overview

Sudan continues to follow an open-door policy and provides those fleeing conflict and persecution access to its territory. However, the almost 1 million refugees residing in Sudan in camps, rural and urban areas need support from humanitarian and development actors as state services are often underfunded and unable to function to the level that would be required. This includes the support of host communities who often show vulnerabilities similar to those of refugees.

Sudan faces several challenges that affect protection and living standards of refugees in the country. The economy continues to suffer from high inflation and lack of income opportunities while rising food prices further increase their vulnerabilities. Sudan is among the most vulnerable countries to climate change. Extreme weather, increased frequency of droughts and floods, compound other situations of vulnerability that are limiting the capacity to cope and adapt. The COVID-19 pandemic and other disease outbreaks routinely threaten the health of Sudanese citizens and refugees alike. Recurrent inter-communal conflict often close to refugee-hosting areas cause widespread internal displacement and restrict access for humanitarian actors.

While Sudan is not officially implementing the Comprehensive Refugee Response Framework (CRRF), the out-of-camp assistance model in Sudan follows the same principles in supporting national service providers and host communities to meet the additional demand on services in refugee hosting areas. This avoids setting up new parallel services for refugees and prioritizes enhanced access to public services where possible. Additionally, this includes a focus on community-based assistance, especially for Health, WASH, Education and Protection, through the construction of basic infrastructure and improved access to local services for refugees. Refugee Consultation Forum (RCF) partners are also active participants in the United Nations Sustainable Development Cooperation Framework (UNSDCF) for Sudan, which features development activities across sectors such as social services, governance, community mobilization among others. The RCF will continue to strategically engage through the UNSDCF to ensure that the development needs of refugees and host communities can be addressed in alignment with national development priorities, reflecting the importance to integrate needs of both communities in refugee-hosting areas into development prioritization. Advocacy and engagement within this trajectory are of increasing importance, recognizing that development funding has currently been put on hold.

Sudan hosts various groups of refugees and asylum-seekers. While some have been in Sudan for generations others have only arrived within the last five years. While Khartoum hosts the highest number of refugees from various origins other populations are concentrated close to the border to their countries of origin.

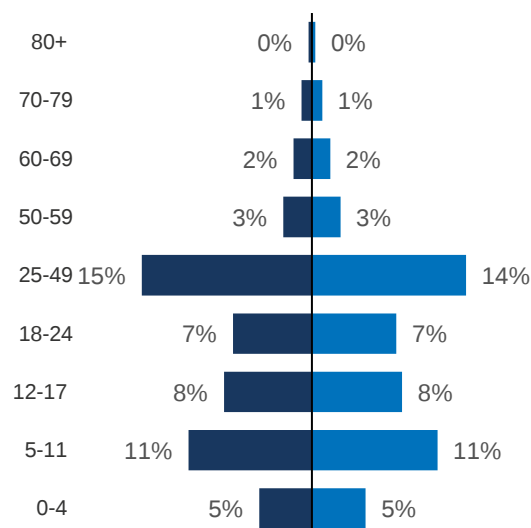
Population Planning Figures

Country	Population as of end of 2022	Planned Population as of end of 2023 ²
South Sudan	796,831	624,235
Ethiopian	70,978	120,611
Eritrea	134,714	91,128
Syria	93,478	66,081
Central African Republic	24,369	19,587
Chad	4,657	2,029
Yemen	2,329	1,538
other	1,734	1,036
Total refugees	1,137,663	926,245

Host Population		
Host Population	228,960	231,560
Total	1,366,623	1,157,805

Age and gender breakdown

■ Female ■ Male



15% of total 926k³

Persons with disabilities



49.8%

Female refugees, of which 26.2% are women and 23.6% are girls



50.2%

Male refugees, of which 27.1% are men and 23.1% are boys

² Planned population figures are subject to regular revision. Please refer to UNHCR's monthly population dashboards for updated population figures.

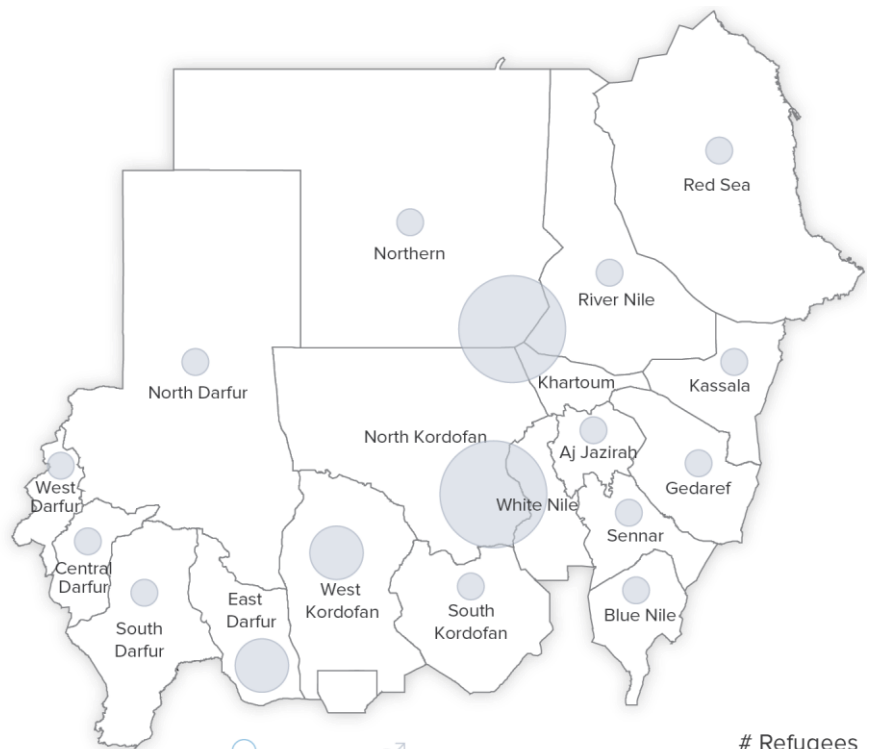
³ Per cent of refugees with disabilities is an estimate based on the [IASC Guidelines on the Inclusion of Persons with Disability in Humanitarian Action, 2019](#).

Refugees from South Sudan

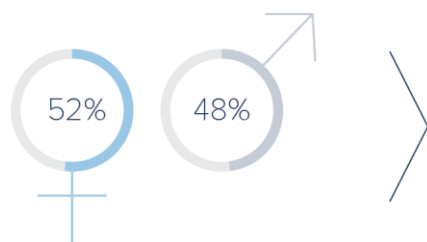


796,831

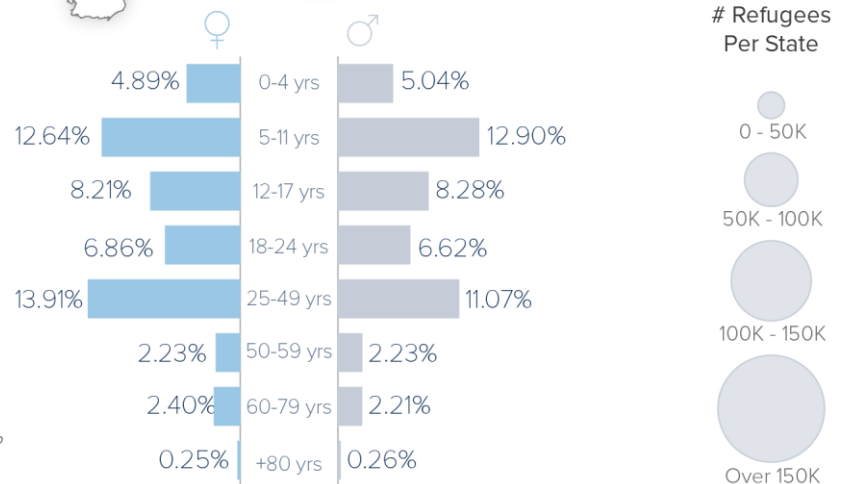
Population as of end of 2022



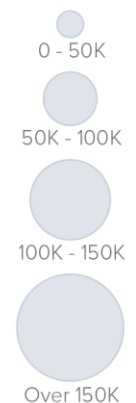
Age and Gender Breakdown



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Refugees Per State



South Sudanese continue to be the largest group of refugees in the country with Khartoum and White Nile States hosting the largest numbers of refugees. Only 35 per cent of South Sudanese refugees reside in camps while the majority lives in rural settlements, close to border points and urban areas including the “open areas” in Khartoum State. Only 74 per cent of the South Sudanese refugees in Sudan are individually registered with an additional 3 per cent registered on household level. Around 52 per cent of the population are female, 37 per cent are of school age children (6-17), and 53 per cent are women-headed households.

New arrivals from South Sudan, fleeing tribal conflict and conflict-related food insecurity, are granted refugee status on a group basis, as per the Memorandum of Understanding (MOU) signed between UNHCR and the GoS's Commission for Refugees (COR) in September 2016. White Nile and East Darfur received the highest numbers of South Sudanese in 2022; by August 2022 more than 30,000 South Sudanese refugees crossed into Sudan.



Rainy season in Dabat Bosin camp in White Nile causes stagnant water, diseases and mobility problems. Photo: NRC/Ahmed Omer

Approximately 35 per cent of the current South Sudanese refugee populations are living in 11 official camps in White Nile (9) and East Darfur (2) with additional numbers living in camp-like settlements adjacent to host communities, including an estimated 120,000 refugees living in the “open areas” in Khartoum, where their situation remains dire with high humanitarian needs. Many refugee communities have lived for decades in these areas, some of whom may be eligible to Sudanese nationality under the country’s Nationality Act 1994 (amended in 2011 and 2018).

Due to a continuous low-level influx and limited opportunities, camps are overcrowded, and service provision is overstretched. Outside of camps South Sudanese refugees live either in urban areas, often in state capitals including Kosti, White Nile and Khartoum or in out-of-camp settlements located in remote and underdeveloped areas, where resources, infrastructure and basic services are extremely limited. Sudan’s rainy season (June to September) makes access in many areas extremely difficult, with many camp and out-of-camp areas completely inaccessible for weeks and months at a time.

Under IGAD sponsorship, the Governments of Sudan and South Sudan are leading a comprehensive solutions initiative for displacement affected populations in these two countries. It provides a roadmap outlining the next steps toward short, medium, and sustainable solutions for seven million forcibly displaced persons, including IDPs and refugees originating from and hosted by the two host countries as well as returnees.

Refugees from Eritrea

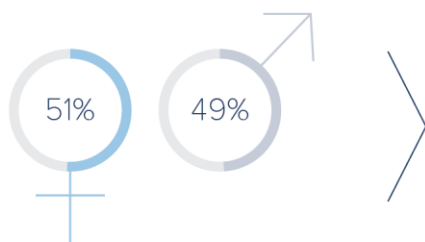


134,714

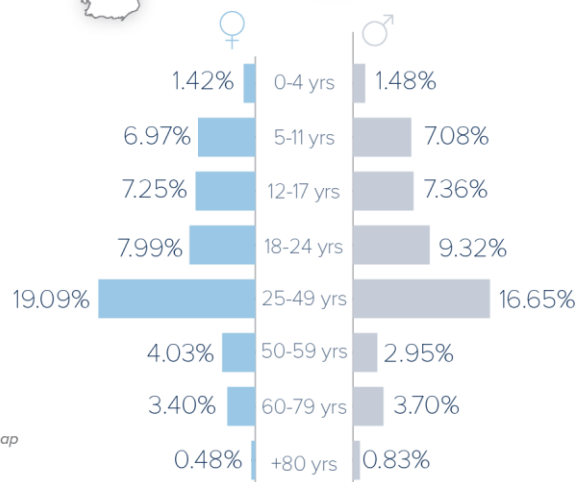
Population as of end of 2022



Age and Gender Breakdown



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Refugees Per State



The situation of Eritrean refugees in Sudan is one of the most protracted in the world with the first Eritrean refugees arriving over 50 years ago, and approximately 50 per cent of those living in camps were born there. While verification processes are ongoing by the end of 2023, it is projected that over 91,000 Eritrean refugees will be living in nine camps in Kassala and Gedaref, and parts of Kassala town and Khartoum.

Over the last five years on average 6,500 new Eritrean refugees crossed into Sudan every year, and in 2022 by August more than 5,800 Eritrean refugees had arrived in Sudan. While on 2 November 2022 a peace accord was signed by the Ethiopian government and the Tigray People's Liberation Front (TPLF), the potential of continued new arrivals of Eritrean refugees from refugee camps in Ethiopia remains a possibility. It is possible that these movements are made by refugees in search of humanitarian aid and other services. COR assists asylum-seekers at the Sudanese border, where they are temporarily housed in reception centres before being transferred to the Shagarab camps where they undergo health and nutrition screening, security screening, registration, and individual Refugee Status Determination (RSD) procedures, while receiving lifesaving and protection services and shelter.

An estimated 50 per cent of the new arrivals in the Shagarab camps reportedly migrate onwards, becoming vulnerable to criminal networks involved in human smuggling and trafficking of people. Along these migratory routes, refugees and asylum-seekers can be exposed to various forms of exploitation and human rights abuses, including gender-based violence (GBV). Moreover, onward movement puts refugees at risk of refoulement. Unaccompanied and Separated Children (UASC), among other children at risk, travelling in mixed flows along these dangerous routes are exposed to heightened risks of abuse, violence, and exploitation.



A football tournament is hosted at the Abuda refugee camp in Kassala, east Sudan. Photo: UNHCR

Refugees from Ethiopia



70,978

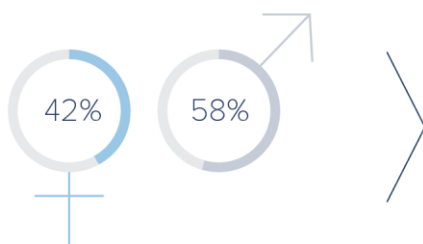
Population as of end of 2022

59,014

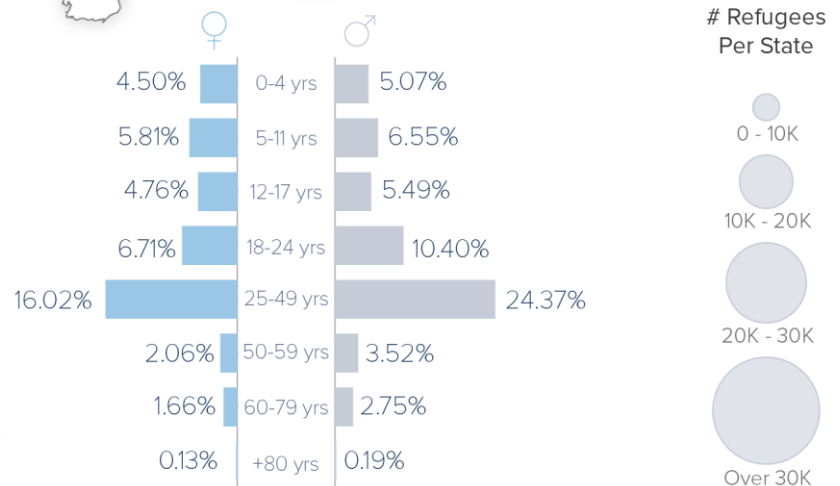
Total Ethiopian new arrivals by the end of November 2021.



Age and Gender Breakdown



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After conflict broke out in the Tigray region in Northern Ethiopia in November 2020, refugees started to arrive in Gedaref, Kassala and Blue Nile States. In 2022 the influx slowed down significantly. By 2022 over 59,000 refugees and asylum-seekers arrived in Sudan due to the violence in Ethiopia. Those of Tigrayan ethnicity who fled the conflict are granted refugee status on a group basis as per the Declaration made by COR in December 2020, but this practice does not apply to Ethiopians of other ethnicities.

Refugee response partners have established three refugee camps in Gedaref (Um Rakuba, Tunaydbah and Babikri) and one site in Blue Nile State (Camp 6) where basic services are provided. Further, protection and basic services are provided at the transit centre in Hamdayet, Kassala and the border points in village 8 and Basunda in Gedaref. The majority of Tigrayan refugees are hosted in Um Rakuba, Tunaydbah and Babikri amounting to over 43,000 individuals living in both sites, meanwhile, over 8,000 individuals are hosted in Village/Camp 6. Approximately, 13,000 Ethiopia refugees are living mostly in Khartoum who arrived prior to 2020.

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Following the agreement for the cessation of hostilities in Ethiopia's northern Tigray region, signed by parties to the conflict on 02 November 2022, partners in Gedaref are monitoring the situation closely to prepare for new developments in 2023. However, large scale and or facilitated voluntary returns are not anticipated until certain preconditions on the ground are met, including improved security conditions, humanitarian access and restoration of services. In the interim, humanitarian service provision for refugees in East Sudan will be required to maintain the safety, dignity and wellbeing of refugees having fled this conflict.



Refugees board the bus which will take them from the Hamdayet transit centre to Um Rakuba and Tunaydbah camps in Gedaref, east Sudan.
Photo: UNHCR/Edward Leposky

Refugees from the Central African Republic

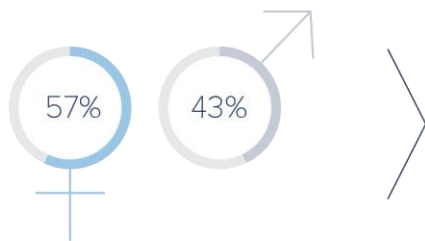


24,369

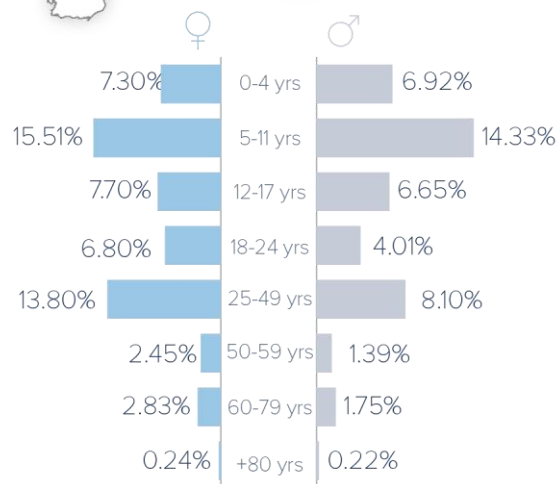
Population as of end of 2022



Age and Gender Breakdown



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Refugees Per State



Most refugees from the Central African Republic (CAR) arrived in 2019 after inter-tribal violence in CAR. It is projected that almost 20,000 CAR refugees will be living in Sudan in 2023, mostly in South and Central Darfur. After violence erupted again following contested elections in CAR at the end of 2020, CRP partners prepared an inter-agency contingency plan and took emergency preparedness measures. Sudan has continued to see new arrivals from CAR since, and in 2022 more than 600 refugees from CAR fled to Sudan.

The majority of the refugees from CAR are hosted in the settlements of Um Dafoug and Al Amal (Al Mashagah) in South Darfur and Um Dukhun settlement in Central Darfur. Basic services, including general protection, child protection and GBV services, are provided in those settlements and need to be sustained and increased.

Refugees from Arab countries



93,478

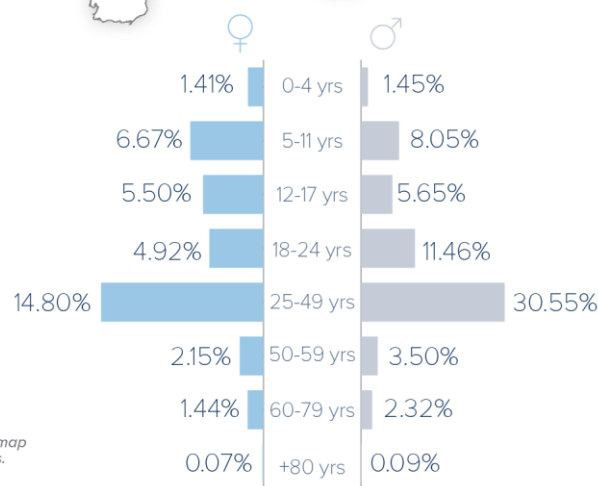
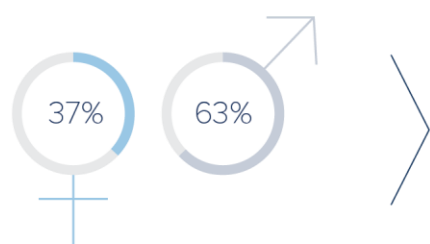
Syrian Refugees Population
as of end of 2022

2,329

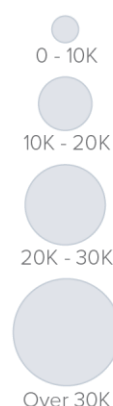
Yemeni Refugees Population
as of end of 2022



Age and Gender Breakdown



Refugees Per State



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Abyei region: Final status of the Abyei area is not yet determined.

There are an estimated 93,000 Syrian and 2,000 Yemeni refugees living in Sudan, the majority of whom are settled in Khartoum. As Arab nationals do not have access to the national asylum procedure in Sudan due to the government policy of considering them as “sisters and brothers”, members of these groups are not all registered as asylum-seekers or refugees. Under this policy, they used to be granted almost the same treatment as Sudanese nationals except for political rights. However, recent political changes have cast uncertainty regarding their rights in Sudan, and this policy change has created a vulnerable situation with legal uncertainty regarding their status in Sudan.



UNHCR and shelter partner Norwegian Church Aid distributed tents to newly arrived refugees from the Central African Republic and South Sudan. Photo: UNHCR/Behrooz Taleb

Host communities

Host communities are often the first responders to refugees that arrive in Sudan. Often, those host communities live in remote areas where basic services are lacking and natural hazards, particularly floods, affect their households each year. Refugees and local communities are both in need of humanitarian assistance and opportunities to increase their self-reliance as the country-wide economic situation, worsening food insecurity, deteriorating health care and lack of access to basic services affect them both.

Host communities will be incorporated in the response plan as they face similar vulnerabilities, such as the deteriorating economy, rising food prices and gaps in access to basic services, especially in remote underserved areas. In addition, addressing host community needs reduces the risk of social tension between refugees and hosting communities while highlighting benefits from investments in local infrastructure and service provision to all populations. An area-based approach is being recommended to involve both population groups throughout the different stages of the project cycle, enabling response to common needs and promoting inclusive access to services. Along with the needs described in the Humanitarian Response Plan (HRP) the Sudan CRP advocates for increased support to host communities, particularly in rural settlements and urban areas where inter-agency partners include host communities in their interventions.

Response Prioritization

The CRP applies a prioritization approach that uses a multisectoral analysis that follows the Joint Intersectoral Analysis Framework (JIAF) and takes response capacities into account. Based on the 2022 Multisectoral Needs Assessment (MSNA) for refugees and other surveys and assessments the CRP determines a People in Need (PiN) figure and ranks them according to the assessed severities. The process is aligned with the Humanitarian Needs Overview (HNO) planning process and intends to identify needs, response gaps and priorities to inform response planning and resource allocation.

People in Need (PiN) calculation and severity ranking

The inter-agency Refugee Consultation Forum (RCF) developed a severity ranking to identify the localities in Sudan that have a high severity of needs for refugees and therefore should be prioritized in the response. This ranking is based on multisectoral indicators that measure the severity of needs across all refugee hosting localities. Within the Country Refugee Response Plan, lifesaving and life-sustaining indicators were used to define the severity of needs through a combination of 18 sectoral indicators that can be found in Annex 2. The severity of needs ranges from minimal (level 1) to catastrophic (level 5). A list of prioritized localities is provided in Annex 1.

The severity of needs ranking was based on UNHCR's refugee population projection for 2023 and a sectoral assessment data to prioritize the response for each refugee hosting locality. Key trends from the severity analysis include:

1st Priority: Needs severity level 4 “extreme” and 5 “catastrophic”:

This category includes locations hosting refugees that are either living in localities with assessed extreme (level 4) or catastrophic (level 5) severity of need or are highly reliant on humanitarian assistance that needs to be sustained and/or scaled up to accommodate increasing numbers of people. This includes refugee camps, reception points and parts of the Khartoum “open areas”.

2nd Priority: Needs severity level 3 or “severe”:

This category includes locations where refugees have severe needs and include camp-like settlements in urban and rural areas. Those locations typically have critical needs in nutrition and food security, poor infrastructure, and protection gaps, often resulting in heightened exposure to protection risks exacerbated by lack of available specialized services. The population in these locations have their needs only partially covered and struggle to cope.

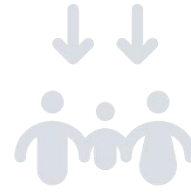
Needs severity level 1 “minimal” and 2 “stress”:

This includes localities with no active refugee response and with a very low number of registered refugees who live among host communities.



926,245

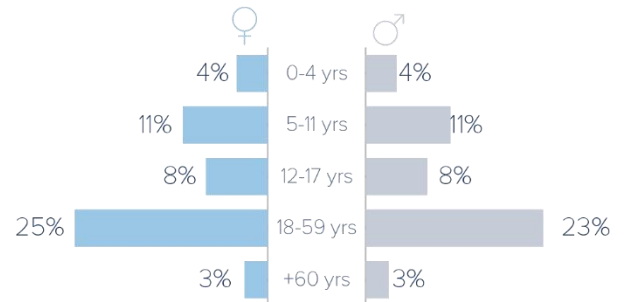
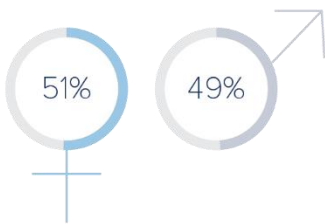
Planned Population as of end of 2023



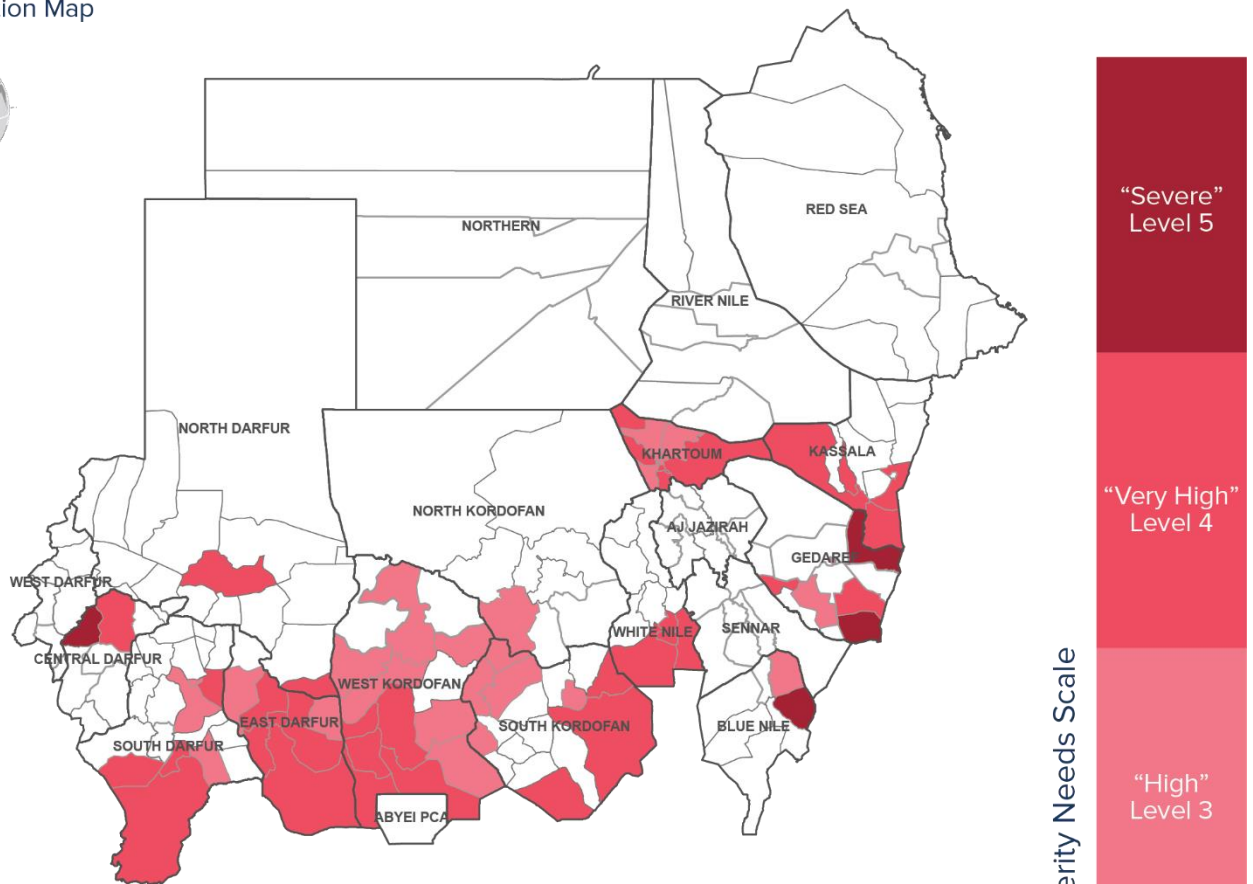
836,778

People targeted in 2023

Age and Gender Breakdown of Refugee Population by 2022



Prioritization Map



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
 Abyei region: Final status of the Abyei area is not yet determined.

Severity Needs Scale

"Severe"
Level 5

"Very High"
Level 4

"High"
Level 3



Sudan Protection Needs, Vulnerabilities and Risks

Protection

Sudan has maintained an open-door policy for persons seeking international protection in the country and provides them access to territory and asylum. Influxes of new arrivals continue in different areas, and as per government policy asylum seekers are required to register at the closest COR office to their entry point. In the context of encampment policy, refugees must obtain travel permissions to legally move outside of refugee camps or any designated area of residence, which is implemented in a restrictive manner and in some areas implies payment of fees. Registration of refugees and asylum-seekers is conducted jointly by UNHCR and COR registration staff and is ongoing across the regions. Nevertheless, there is a significant number of refugees who do not possess documentation confirming their status as refugees or asylum seekers, exposing them to protection risks, including detention, extortion, and possible deportation. Further, lacking documentation heightens vulnerabilities by imposing limitations on access to socio-economic and protection services including education for their children, health services and livelihoods opportunities. Issuance of refugee cards is mostly on hold as government provision of foreigner numbers⁴ faces extended delays, and similarly, access to civil registration services including for birth certificates remains challenging for most refugees.

Protracted refugee caseloads, in particular South Sudanese that lack nationality documents and birth certificates, are at increasing risk of statelessness. Therefore, access to refugee documentation is vital to overcome risks of potential statelessness. In addition, refugees and asylum-seekers are mostly unable to access justice systems, largely due to gaps in awareness among duty bearers on their rights and existing legal protections. Moreover, critical gaps in access to legal representation, compounded by language barriers, affect refugees' access justice mechanisms.

Refugee Status Determination (RSD) is carried out by COR in eastern Sudan and in Khartoum, however low capacity and non-standardized processes affect quality of RSD, including at times the fairness, efficiency and integrity. This is

⁴ The Foreigner Number is a new documentary requirement introduced by the Civil Registry Act 2011, it's a unique identification number that is given to all aliens residing legally in the country including refugees (similar to the National Number which is issued to Sudanese nationals)

particularly visible in the absence of a unified approach in RSD for asylum-seekers of different nationalities and no thorough community profiling of different refugees and asylum-seekers.

The other protection risks affecting refugees and asylum-seekers in Sudan are human trafficking and smuggling. Partners have been working on addressing the involvement of refugees and asylum seekers in risky mixed movements, and their vulnerability to smuggling and trafficking. Refugees arriving in Eastern Sudan often have intentions to move onward, and humanitarian partners have been providing them with information on associated risks and empowering them in situ to make informed decisions.

There have been limited durable solution prospects especially for refugees in protracted situations. Resettlement quotas have been limited, and with the volatile situation in almost all countries of origin of refugees in Sudan, repatriation has been largely unattainable. Severe climate impacts add increasingly to the obstacles to achieve durable solutions for refugees by rendering some areas of return and potential local integration unsuitable to support large populations in face of depleting local resources.

Child Protection

Children comprise 43 per cent of the registered refugee and asylum-seeker population in Sudan with 11 per cent being unaccompanied and separated children (UASC). While the UASC require community-based alternative care arrangement, family tracing and reunification and assistance, only 26 per cent are placed in alternative care arrangements which puts them at heightened risk. Lack of access to livelihood opportunities for families and youth, limited resources and staff turnover, particularly in remote areas, have impacted the protection environment and the capacity of partners to provide quality child protection services, including Best Interests Procedure/case management, to prevent and address the child protection risks facing children, including UASC and children with disabilities, which exposed them to the various forms of exploitation and violence including sexual exploitation, child labour, child marriage, sexual abuse, and trafficking. In addition, inaccessibility to civil documents, namely birth certificates for refugee children, in addition to the socioeconomic factors, affected their access to education, which resulted in many children being forced to drop out of school and to face greater child protection risks. Inaccessibility to civil documents further increases the risk of statelessness.

Regarding age-specific activities, there are limited activities targeting adolescents and youth, for example life skills.

Gender-based violence

GBV remains one of the major protection concerns facing refugees and asylum-seekers, disproportionately affecting women and girls, but also some men and boys exposed to sexual violence. GBV remains largely underreported, due to fear of retaliation and stigma, but anecdotal evidence obtained through offline trackers and service use reports indicate that the main forms and types of GBV are rape, sexual and physical violence, intimate partner violence, forced and child marriage, economic and emotional violence as well as female genital cutting/mutilation and forced sex work.

In camps and settlements GBV risks are increased by inadequate lighting, limited access to energy and the long distances that women and girls need to walk to collect firewood and fetch water. In participatory assessments, women have also reported being exposed to GBV while seeking informal work. These risks are further compounded by limited

assistance and formal livelihood opportunities in a growing context of food insecurity that may force women to resort to coping mechanisms such as sex work or selling alcohol, which increases their risk of exposure to GBV, including potential risk of sexual exploitation and abuse (SEA). As was highlighted in the GBV Safety Audit assessment in Gedaref state, the use of communal latrines at night puts women and girls at considerable risk of GBV.

Challenges in GBV response efforts include limited capacity of NGOs to respond due largely to limitations on resources and staff turnovers, and specifically pronounced in remote and hard to reach areas. The GBV response is further hampered by a lack of safe houses for survivors, gaps in referral pathways in some locations, such as access to legal services, psychosocial support, and health response for survivors. Reliance on traditional justice mechanisms is also a barrier to survivor-centred justice and accountability. Women's and girls' participation and empowerment activities are also impeded due to lack of resources.

Partners have been upscaling community engagement in the prevention and response to GBV, raising awareness about GBV and establishing referral mechanisms, reporting channels, and available services. Mainstreaming of GBV across other activities such as child protection and community based MHPSS has been instrumental in encouraging GBV cases to come forward and self-report and access essential services. For example, GBV partners have been advocating for the provision of household level latrines and working on mainstreaming GBV in WASH sector as a risk mitigation measure. Additionally, missing streetlights are currently being installed in Gedaref camps.

In general, funding levels for GBV programming have been insufficient to cover the needs, affecting also overall quality of GBV prevention, risk mitigation and response interventions in Sudan.



Girls attending a class in NRC's Um Rakuba Primary School in Um Rakuba refugee camp, Gedaref, Sudan. Photo: NRC/Ahmed Omer

Education

Families continue to be forced to balance between providing the very basic needs or sending their children to school. Almost 70 per cent of basic school and over 90 per cent of secondary school-age refugee children are out of school across Sudan. At basic school, the gender disaggregation of enrolled children is almost at 50/50, but in secondary school, the number of out-of-school girls notably exceeds that of out-of-school boys. Refugees from South Sudan are the worst hit as they mostly live outside of camps in already disadvantaged locations without access to basic services. Education-related fees differ by state resulting in challenges to standardize aid packages that support refugee children. Education needs range from national schools' capacity to integrate refugee children; documentation issues (registration and birth certificates) limiting access; mental health awareness and referrals; psychosocial support for students to promote student psychological wellbeing; as well as teachers' capacity to conduct referrals to services as needed. The capacity of the Ministry of Education to support refugee education faces problems of sustainability as longer-term funding is not secured. Further, national schools do not have the capacity to accommodate refugee children's varying needs and safety and security are not provided in schools. Schools have little to no capacity to integrate and care for children with disabilities and other diverse needs and characteristics, and vocational training opportunities designed in coordination with youth are urgently needed. Urban refugees face additional barriers to access education as refugees are often required to navigate access to facilities independently including payments for fees and school supplies. The majority of those resorting to onward movements are adolescents and youth, and refugees have repeated in various platforms that access to education is a strong driver for onward movement. Access to education in Sudan, while theoretically available, is not accessible to many children and youth, pushing both old and new refugee arrivals to move in search for better education.

Shelter & NFIs

Shelter and NFI needs in Sudan continue to grow with an estimate of 374,000 of refugees and asylum-seekers requiring sector-specific assistance in 2023. The needs of almost 1 million refugees are further compounded by a crippling economic crisis which limits household coping strategies and opportunities for self-reliance. Furthermore, climate change and environmental degradation threaten to raise the risks of more severe flooding while failing infrastructure and inadequate housing make populations more vulnerable to climate shocks and deteriorating environmental conditions.

South Sudanese refugees face the highest severity of needs in localities such as frequently flooded Aj Jabalain in White Nile, "open areas" in Khartoum, Kario camp in East Darfur, Al Leri in South Kordofan, to name just a few. According to the 2022 MSNA, only 6 per cent of refugees live in adequate dwellings, i.e., permanent shelters, that provide sufficient levels of privacy, security, and protection from exposure. This is followed by 32 per cent that live in semi-permanent shelters such as Tukuls, while the rest – 62 per cent live in substandard shelters (emergency, makeshift, collective, none). With as much as 94 per cent of households reporting issues with their shelter and 84 per cent of households reporting shelter damage, even refugees with access to more durable shelter types still live in precarious conditions and crumbling housing. The most prevalent shelter issue is leaking (85%) which is consistent with most reported damage types: cracked roof (62%) and partial roof collapse (26%). Torches and solar lamps are household items reported as most needed (88%) followed by mattresses/sleeping mats (80%), mosquito nets and kitchen sets (78%), blankets (74%)

and plastic sheets and jerry cans (71%). As much as 72 per cent of refugee households are missing five or more (out of seven) basic household items⁵.

Most refugees continue to reside in inadequate settlements and substandard shelters for prolonged periods of time making them increasingly vulnerable to protection threats, element exposure, disease vectors and pests. A high percentage of refugees reported several issues during the 2022 MSNA such as overcrowding (64%), shelters built in unsafe locations (37%), lack of privacy or locks (25%), distant water sources (28%), all of which increase the risk of intimate partner violence and domestic violence, sexual violence, harassment, sexual exploitation, and other forms of GBV—especially against women, girls and boys. Poor settlement situation, with lack of infrastructure, public facilities and utilities impedes access to basic services and has a profound negative impact on both physical and mental health. This includes lack of pedestrian and vehicular access, lack of drainage and disaster risk reduction (DRR) infrastructure for prevention of flooding and waterlogging, lack of solid waste management, inadequate sanitation, long distances, and poor walkability to public facilities, etc., all of which have been reported at various degrees in the 2022 MSNA. Persons with disabilities, older people and other individuals with reduced mobility bear the worst consequences of sub-standard settlement conditions, whereby physical barriers impact their ability to engage in community activities.

Health and Nutrition

The fragile health system coupled with recurrent multiple emergencies and the ongoing economic crisis in Sudan have negatively impacted the health and nutrition levels of refugees living in Sudan. Refugees and their hosts live in areas with limited health infrastructure and availability of medication, understaffing and medical supply shortages. While refugees in camps are significantly better off, with over 90 per cent having access to primary health services, only 25-50 per cent of refugees living outside of camps have consistent access to quality health care. In out-of-camp locations and urban settings where refugees are expected to pay out of pocket for health services, the lack of livelihood opportunities means that most refugees have very limited access to quality primary, secondary and tertiary medical care treatment if available - including barriers in accessing clinical care for rape in these locations. Even if there is access to secondary and tertiary health services, there is limited support for the treatment of chronic illnesses. Integration of health services to meet the needs of both out-of-camp refugees and host communities is a key challenge. The ongoing COVID-19 pandemic and recent outbreak of monkeypox in Sudan continue to overburden the health infrastructure in Sudan.

The Standardized Expanded Nutrition Survey (SENS) conducted in White Nile in 2022 shows that the nutritional status of refugees is very high or critical, with a classification of global-acute-malnutrition (GAM) prevalence ranging from 15.2 per cent to 18.6 per cent across the ten refugee camps in the state. These levels are above the 15 per cent cut off defining critical nutrition situations. Likewise, the severe acute malnutrition (SAM) prevalence was found above 2 per cent, which is a critical level according to UNHCR standards for refugee populations. In comparison with the results of SENS in 2018, key nutrition indicators for GAM/SAM prevalence indicate a worsening situation. The prevalence of Anaemia among children 6-59 months of age was equally categorized as critical (critical if $\geq 40\%$) in all camps. With rising food prices and decreasing assistance due to funding shortages the outlook for refugee's nutrition status in 2023 is dire.

⁵ The 7 basic household/non-food items: blankets, plastic sheet, jerry cans, kitchen sets, sleeping mats, solar lamp and mosquito net



Provision of quality laboratory services in Tunaydbah Camp, Gedaref, east Sudan. Photo: Alight/Abdalla Hassan Mudardam

WASH

Across all refugee camps and the Khartoum “open areas” there are outstanding WASH needs that require improvement. The average water supply for refugees is 16 litres per person per day on average, lower than the UNHCR standard of 20 litres per person per day. Further, access to safe water needs improvement through rehabilitation of non-functional water systems and development of new water sources as well as timely preventive maintenance. All water systems need continuous operational support and maintenance to increase and retain access to safe water, improve health and reduce WASH-related diseases vulnerability by the populations. Additionally, intensifying hygiene promotion activities are required to reduce open defecation which is still practiced by over 30 per cent of the population, and almost 50 per cent of families do not have access to household latrines, far short of the standard of more than 85 per cent. The result is increased protection risks including GBV facing women, girls and persons with disabilities when accessing communal sanitation facilities - risks are often exacerbated by distances travelled to reach facilities and in instances where communal lighting is not installed, provoking higher risks of using facilities at night.

The outbreak of monkeypox in Gedaref in late 2022 and the ongoing COVID-19 preventive measures require heightened hygiene practices among the population, and in combination with the economic hardship increases refugees’ vulnerability, who increasingly rely on humanitarian support including access soap and other hygiene items as well as adequate water supply. Additionally, the effects of reoccurring floods had damaged many latrines and other WASH infrastructure creating new WASH requirements coupled with additional needs of new arrivals resulting in additional pressure on already overstretched resources. More than 50 per cent of the water supply systems are still running on diesel engine pumps which is costly and has a negative environmental impact. Therefore, there is a need to increase solarization interventions to regularize water supply and reduce carbon footprints.

Food security and livelihoods

Refugees in Sudan are facing several challenges to meet their food needs. While inflation has decreased over the last year, it remains over 100% and continues to significantly drive higher food prices. Further, the crisis in Ukraine has severely impacted the supply of wheat adding further pressure on prices. A third factor is that food assistance for all refugees in Sudan was temporarily reduced to 50% food rations in mid-2022 due to funding shortages, adding to the pressure for refugees to find the means to feed themselves. While 100% food rations are expected to be reintroduced from January 2023, ration cuts have been linked to worse protection, health and nutrition outcomes, ultimately contributing to higher levels of vulnerability.



James Chak was forced to flee with his family from South Sudan due to war. He has since found work as a fish cleaner in the fish market of El Leri in South Kordofan State. Photo: UNHCR/Mogahed Elbasheer

Across most states, refugees experience higher monetary and food vulnerability than host communities. The available livelihoods opportunities for refugees are largely in the informal sector with high uncertainty of daily labour accompanied by elevated risks of exploitation, sexual violence, sexual harassment, and abuse. Many refugees report being unable to cover the increasing costs of basic needs. Movement restrictions further reduce the capacity for self-reliance by preventing refugees from accessing better opportunities. Livelihoods gaps have direct impacts on child protection and gender-based violence by reducing families' capacity to keep their children in school and turning to harmful coping strategies including child marriages, school drop-out and child labour. Refugees face several constraints including limited access to land for agricultural production; wage employment and work permit opportunities; business entrepreneurship opportunities; business registration; financial (formal and informal) services; and mobile services. Increased poverty in the host communities creates conflicts if only refugees benefit from services. In locations where Sudan's encampment policy is enforced, refugees also face limitations on freedom of movement, directly impacting access to information, livelihoods and basic services.

Energy and Environment

Over 98 per cent of refugee households have no access to an energy efficient stove and most of the families rely on charcoal and firewood for cooking which is both expensive and unsustainable with adverse effects on health from fumes. Most poor families cannot afford to buy charcoal or firewood from near markets hence are forced to go long distances to the bush to fetch for firewood which bears protection risks, especially for women who are at risk of GBV, and denies children time for their studies and for mothers their caregiving time and engagement in income generating activities. The use of traditional stoves and the "three stone method"⁶ are common forms of cooking across Sudan using locally available materials. Research has indicated however that this traditional form of cooking requires two and a half times

⁶ Traditional cooking method used in Sudan by placing cooking pot on three stones or similar that surround an open fire

as much energy than energy efficient stoves, equating to significantly higher costs associated with cooking fuel and risking negative coping mechanisms to offset these costs, including eating raw or improperly cooked food, eating cold meals or skipping meals, and contributing to health risks and lower food security.

Dependency on biomass energy with limited affordability and access to clean cooking energy and fuel-efficient cooking stoves contributes to environmental degradation. This is particularly the case around refugee camps and settlements due to high pressure placed on local natural resources, leading also to heightened risks of natural hazards like landslides and floods over time. Measures to preserve and rehabilitate the natural environment and mitigate degradation in displacement settings have important co-benefits for the protection and resilience of refugees and host communities. This highlights the need to scale up afforestation, reforestation and other environmentally sustainable approaches in displacement settings, including community collaborative mechanisms and investment in accessible, renewable energy sources to meet refugee and host community needs.



A South Sudanese refugee woman receives a personal hygiene kit in Kadugli, South Kordofan. Photo: UNHCR/Deep Raj Uprety

Part 2: Sudan Protection and Solutions Strategy

The Refugee Response in Sudan is guided by the pledges made by the Sudanese government during the 2019 Global Refugee Forum, the Intergovernmental Authority on Development (IGAD) and the five-year national strategy on solutions for Internally Displaced Persons, Returnees, Refugee and Host Communities. It also aligns with the United Nations Sustainable Development Cooperation Framework (UNSDCF) for Sudan, linking to development actors and activities where possible. Further, the Sudan Country Refugee Response Plan is aligned with UNHCR's Multiyear strategy (2023 – 2025) and the overall humanitarian response in Sudan as described in the Humanitarian Response Plan (HRP).

Strategic Objectives

SO1: Strengthen the protection environment for refugees and asylum-seekers

The CRP aims to achieve refugees', asylum-seekers', and stateless persons' ability in Sudan to enjoy their rights in line with national, regional, and international pledges, standards, and fair protection procedures, and will work to ensure that international standards of protection are met, upheld and applied. The RCF welcomes the continuous open-door policy of the Government of Sudan (GoS) providing refugees with access to territory while maintaining the civilian character of refugee sites in Sudan.

To strengthen the protection environment for refugees in Sudan efforts will be made to advocate with the GoS through different forums and channels to amend the current policy and legislative framework, particularly in relation of the current application of an encampment policy that imposes movement restrictions on refugees for movements outside their designated areas of residence within the country, thus creating barriers to seek employment/livelihoods and other opportunities and services such as education and health.

Advocacy will also encompass engagement on legislative and administrative level with the GoS to ensure that refugees can fully enjoy the rights enshrined in the Asylum (Organization) Act 2014 and other relevant laws, including the right to work and the right to housing, land and properties, underpinning access to adequate standards of living. In this regard, the focus will also be placed on enhancing individual registration and issuance of individual documentation for all refugees and asylum-seekers across the country. This is of particular importance for new arrivals to ensure that refugees are protected from refoulement and other protection risks and are systematically given access to national asylum procedure upon arrival in Sudan. Awareness and sensitization initiatives on basic and existing refugee rights and obligations with local authorities, host communities and service providers will contribute to improve asylum space, reduce social tension and promote social cohesion.

SO2: Enable access to timely protection interventions and lifesaving assistance for refugees and host communities

The unpredictable situation in countries neighbouring Sudan, especially South Sudan, Ethiopia, Eritrea, Chad, and the Central African Republic, requires humanitarian actors to maintain a high level of preparedness to readily assist newly arriving refugees and asylum-seekers at border points and later in refugee sites with protection interventions and other lifesaving services.

38 per cent of all refugees in Sudan are currently living in camps, some, like the Eritrean refugees in Kassala, arrived in the late 1960s. The remaining 62 per cent are living in camp-like settlements, rural and urban areas with little access to basic services.

Under this objective, the response will prioritize multisectoral lifesaving assistance in refugee camps, camp-like settlements and reception points. Refugees arrive in Sudan with minimal belongings and in critical condition that require urgent lifesaving assistance across all sectors. Although refugees are receiving protection services and basic assistance in camps, gaps remain. High levels of vulnerability and lack of sustainable coping mechanisms have resulted in large-scale dependency on the services provided at refugee sites, requiring a continuation of assistance until durable solutions can be found.

At the refugee sites the response includes the provision of adequate shelter and core relief items, access to water and sanitation and food assistance, either through in-kind or cash-based interventions. Further, provision of education in emergency settings and health and nutrition services is required.

As host communities have similar levels of vulnerability as refugees and to prevent social tensions between the two groups, host communities must be incorporated in the planning and implementation of the response. This includes strengthening locally existing services and upgrading infrastructure across all sectors in line with area-based approaches that promote assistance to both population groups to holistically meet needs on the ground.

To enhance analysis on protection risks and trends, inform programming and identify urgent issues to be addressed, protection monitoring will be strengthened, and efforts will be made to meaningfully engage refugee and hosting communities in planning and implementing activities. Case management systems will be enhanced to support individuals with specific needs, to respond to their individual protection concerns and ensure that specialised individual support is made available to them. Strengthening lifesaving gender-based violence prevention and response programming, enhancing child protection interventions, and making efforts to address barriers to access and inclusion of persons with disabilities, older persons and persons with other diverse characteristics will also be required. Community-based structures and networks will be engaged, and their capacity strengthened to identify community-based solutions. Based on assessments of their preferred modalities of receiving information, two-way communication, feedback and response mechanisms will be maintained to foster accountability to affected people.



South Sudanese refugee children living in Al Sirajiya settlement on the eastern corridor of South Kordofan state. Photo: UNHCR/Deep Raj Uprety

SO3: Provide equitable access to basic services for refugees and strengthen opportunities for resilience and self-reliance while finding lasting solutions for refugees

CRP partners work towards the objective that a) refugees and asylum-seekers progressively achieve self-reliance through gradually increased socioeconomic inclusion and access to multi-sectoral services to meet their needs and improve their wellbeing, and b) refugees and asylum-seekers benefit from improved conditions in areas of potential local integration and benefit from an increasingly enabling environment towards solutions across the humanitarian-development-peace nexus.

Voluntary return remains elusive for most refugees in Sudan due to continued instability in their countries of origin, however monitoring of preconditions favourable for voluntary returns in neighbouring countries is continuously ongoing by partners. In tandem, and despite increased efforts, resettlement options remain extremely limited. The extended period that refugees have been living in Sudan requires a gradual move from camp and camp-like situations to durable solutions. In line with the pledges of the GoS at the Global Refugee Forum in 2019, the Refugee Response aims to support processes to include refugees in public services systems, especially health, nutrition, and education. Further, despite the bleak economic outlook, income generating activities and capacity development interventions are aiming at increased self-reliance and resilience. Partners will also work closely with displaced populations and host communities to strengthen resilience, including preparation for climate and environmental risks. Advocacy will be strengthened to allow easier cross state movement that facilitates refugees' ability to seek employment and education opportunities. Although funding for development assistance has been reduced after the events of 25 October 2021 Refugee Response partners continue to look for solutions with development actors to support long-term solutions for refugees, especially in the context of protracted displacement, chronic underfunding, and rising cost of living in Sudan.

The nine pledges of the GoS at the GRF⁷

1. Continue to maintain and implement an open-door policy for refugees
2. Develop solutions for the root causes of forced displacement
3. Create and enhance an enabling environment for return of refugees and IDPs and facilitate their reintegration
4. Integrate refugee education in national education system in gradual manner
5. Integrate health services for refugees in National Health System in a gradual manner
6. Adopt self-reliance policy for refugees and host communities
7. Facilitate humanitarian access to affected people
8. Facilitate movement for refugees
9. Facilitate work for refugees

⁷ <https://data.unhcr.org/en/documents/details/82529>



*In a refugee settlement in West Kordofan, the community has organized open sessions where senior children help teach junior students.
Photo: UNHCR/Deep Raj Uprety*

Sectoral Responses



PROTECTION

The protection response will prioritise the following objectives:

1. Enhanced advocacy and technical support for policy and legislative framework to support local integration of refugees as per the GRF pledge
2. Improved access to individual registration and documentation, while ensuring procedures are age and gender friendly and accessible
3. Improved access to legal information, counselling, and assistance
4. Strengthened community-based protection interventions and supporting meaningful participation of community networks
5. Enhanced GBV prevention, risk mitigation and response
6. Improved child protection services, particularly Best Interests Procedure/case management for children at high risk with focus on unaccompanied and separated children and survivors of violence, exploitation and trafficking
7. Expanded access to durable solutions including voluntary repatriation when feasible, as well as resettlement and complementary legal pathways opportunities

The protection response will retain strategic focus on access to asylum, registration, refugee status determination (RSD) and civil documentation, as fundamental components in accessing basic rights and services. UNHCR will continue its close collaboration and partnership with COR, as the government counterpart on asylum-related matters, to strengthen national capacities and technical skillsets for effective, transparent and accountable registration and RSD processes. Registration efforts will be conducted with dual objectives – to ensure an effective and efficient process of registration

for new arrivals, and secondly, to ensure continuous efforts to achieve registration of all longer-term refugees. Registration will enable individuals to access basic services, humanitarian aid, as well as integration into national service systems where feasible. For enhanced legal and physical protection, CRP partners will continue advocacy targeting duty bearers and other stakeholders to improve refugee access to legal assistance, civil registration and civil documentation, and for gradual integration into national social protection programmes in line with GRF pledges. Asylum-seekers and stateless persons are equally targeted by the Protection response to improve access to basic services and reduce vulnerability.

To address trafficking in persons and smuggling risks, partners plan to continue advocacy efforts with the National Committee to Combat Human Trafficking and carry on the activities started under the Telling the Real Story⁸ project in Khartoum and East Sudan, which will focus on awareness raising, empowerment projects targeting youth, and capacity building to increase the community and key stakeholders' efforts to tackle trafficking in persons.

Further to that, partners will continue coordination efforts with key stakeholders to ensure that refugees and asylum-seekers involved in mixed movements have access to asylum and other services that are tailored to their specific needs (language appropriate, age and gender sensitive).

Resettlement remains a valuable protection tool to address the specific needs of refugees, although it is available only to an extremely limited number of refugees who meet very specific criteria as per the quotas provided by resettlement countries, which are far below the current estimated needs. In 2023, UNHCR with the support of partners will continue to identify and refer individuals to fully utilize the limited quota available to refugees in Sudan. At the same time, efforts will be made to expand the scope of complementary legal pathways by advancing access to family reunification, education scholarships and employment opportunities in third countries.

Sub-Sector: Child Protection

The priority will be on strengthening identification of children at risk, Best Interest Procedure and Information Management enhancing appropriate alternative care arrangements for Unaccompanied and Separated Children (UASCs) as well as family tracing and reunification for a better protection of children as per the UNHCR Best Interest Procedure Guidelines⁹. Partners will continue to enhance child-friendly/accessible communication channels to provide information to children and communities on child protection and risks mitigation as well as services. The Advocacy on refugee children's access to national services, particularly documentation and birth certificates will continue.

In addition, child protection actors will continue supporting Community-Based Child Protection Networks (CBCPNs) and other community-based structures to support the identification of children at risk, information dissemination, psychosocial support and the development and uptake of community-level responses to child protection issues. Adolescents and youth-led initiatives and targeted programmes will also be expanded and supported with the aim of enhancing their capacity and engagement in community activities.

Partners will coordinate with the Ministry of Social Development, State Council for Child Welfare and Family and Child Protection Units (FCPU) and work through their social workers in case management processes for refugee children for continuity and to build their capacity on Best Interest Procedures. Despite the government's general acceptance and

⁸ [Home - Telling the Real Story](#)

⁹ <https://www.refworld.org/docid/5c18d7254.html>

cooperation, challenges include weak structures and limited government resources to cater for nationals as well as refugee children.

The Child Protection Sub-Sector will continue to collaborate with other sectors to ensure that their sectors' activities are safe, promote child participation and implement child protection measures, such as safe identification and referral of children at risk of abuse, violence, exploitation, and neglect, in accordance with the Child Protection Minimum Standards in Humanitarian Action¹⁰.

Sub-sector: GBV

CRP partners will focus on GBV prevention through capacity building of Community-Based Protection Networks (CBPNs) and community sensitization while enhancing the engagement of men and boys in GBV prevention activities. Women and girl's empowerment programmes including sensitization and awareness raising activities will be expanded gender equality and GBV prevention programming and enhance meaningful participation in all GBV related programming phases.

On response to GBV, work will be done to strengthen GBV case management capacity to ensure that a survivor-centered approach is adhered to.

Standard operating procedures and referral pathways will be strengthened to ensure that survivors and persons at-risk receive timely support and services with reinforcement of health, Psychosocial Support (PSS) and legal assistance to GBV survivors. Collaboration and coordination with child protection and other humanitarian actors and government stakeholders will be strengthened to enhance referral systems.

Closer cooperation with key GBV actors will be pursued at both state and national levels to improve quality GBV programming for all refugees and asylum-seekers in Sudan and to advocate for their inclusion in national systems including health, MHPSS and referral mechanisms. In addition, technical support will be provided to mainstream GBV in coordination with other humanitarian actors across all sectors. An updated GBV strategy and Action Plan will be developed to enhance inter-agency coordination.



EDUCATION

Key objectives for the Education response are:

1. Refugees have safe access to improved inclusive quality education
2. Refugees are integrated into the national education system

The overarching objective for the Refugee Education response in Sudan remains to support the Government of Sudan to achieve its GRF pledge to integrate refugees into national education systems in a gradual manner and ensure that all refugees, IDPs and people we serve in Sudan have access to quality basic, secondary, and tertiary education.

The refugee education response will focus on enrolment of out of school children (OOSCs), integration of refugees into national systems, capacity building of education providers and improvement of the school environment. In camp

¹⁰ https://alliancecpa.org/sites/default/files/technical/attachments/cpms_2019_final_en.pdf

situations, CRP partners will continue to focus on primary and secondary school education while seeking opportunities to ensure sustainability of education services by introducing user fees and community involvement wherever possible.

Secondly, partners will continue to work closely with the Ministry of Education (MoE), both at the Federal and State levels to ensure quality education for all refugees and integration into public systems. For refugee children scattered within host communities, partners will use community-based approaches to increase the enrolment of refugee children in host community schools. Priority will be given to female students to get cash for education support to enable them to meet the cost of education needs and avoid any risk of drop-outs and negative coping mechanism. Education implementing partners also will integrate and include awareness sessions on SGBV in their activities for adolescent girls and boys to promote safe learning environment which is a key element for girls' enrolment and retention. Besides there will be close coordination between education and WASH in schools to ensure gender sensitive WASH facilities in the schools.

Many schools, including those in camps, suffer from a severe shortage of teachers. This has led to the engagement of refugee volunteer teachers to address this gap. However, the shortages remain. With the support of MoE, most of the refugee volunteer teachers have been assessed and graded as per the MoE guidelines and are receiving incentives that are equivalent to their national counterparts. Through the Education Sector Strategic Plan, CRP partners will continue to advocate for the recruitment and absorption of these teachers into the MoE payroll for continuity and sustainability.

Child protection and GBV risk mitigation will be mainstreamed in all education programmes. Child protection and education partners, and other actors, will work together to prevent and address child protection risks facing children in schools and at home and communities. This will include training of education staff on safe disclosure and identification of children at-risk, implementation of child protection and GBV multisectoral referral pathways and provision of targeted support for children at risk and children with disabilities.



*With the European Union, NRC supports youth initiatives in Gedaref's refugee camps with training, business grants and coaching.
Photo: NRC/Ahmed Omer*

School buildings are often damaged and require rehabilitation or upgrading of WASH facilities. While the response does not include large infrastructure interventions, the improvement of school infrastructure and provision of basic services contribute to improved education outcomes and partners will engage where feasible.

Increased access to tertiary education and vocational training will also be pursued through the promotion of education grants and improved access for refugee students to public universities. A focus on youth and education will also contribute to preventing irregular onward movement.



FOOD SECURITY

The food security sector response will focus on one key objective:

1. Provide timely food support, in-kind or through cash, to food insecure refugees in new and protracted situations

The Sudan CRP food security and livelihood response aims to ensure that refugees who need food assistance and livelihood support will receive assistance to mitigate risks of GBV such as child marriage and harmful coping mechanisms, such as neglect, and child labour. This includes the provision of timely food support, in-kind or through cash, to the food insecure refugees in new and protracted situations, including Unaccompanied and separated children and other children are at risk as they may face particular barriers in accessing assistance. The refugee response is increasingly using cash-based interventions to provide food assistance where market conditions allow it. Food assistance, especially in refugee camps is a high priority, as refugees are highly reliant on food assistance and have few opportunities to generate income and support themselves. Given the high inflation and challenging economic situation in Sudan, voucher and cash values must be periodically adjusted to ensure that the minimum daily food consumption requirement of 2,100 Kcal per person is maintained.



*A South Sudanese refugee maintains a small garden near her shelter in Kharasana refugee settlement in West Kordofan.
Photo: UNHCR/Deep Raj Uprety*



HEALTH & NUTRITION

For 2023, the refugee health and nutrition sector will focus on the following objectives:

1. Strengthening access to comprehensive essential life-saving primary, secondary and tertiary health care services
2. Fostered integration of health services for refugees into national health system in a gradual manner
3. Access to prevention, detection and treatment of malnutrition for refugees is improved
4. Strengthened community outreach, health promotion, community mobilization and behaviour change communication

The overall objective of the health interventions is to ensure refugees have access to essential life-saving health care services through the implementation of a basic package of preventive, promotive and curative primary, secondary, and tertiary healthcare services. Camp-based assistance will include direct support to health facilities and services inside the camp as well as the provision of nutrition services, while out-of-camp support will focus on strengthening local health infrastructure and services to improve coverage and quality of service delivery. In line with GRF pledges, efforts should also support gradual integration of refugees into national health systems, including through enhancing access to public health services, providing capacity building, and supporting standardization and harmonization of health packages to align with Ministry of Health policies.

The health interventions include provision of essential medicines, medical equipment and other medical supplies, recruitment, and capacity building of health personnel, supporting referral services and conducting minor rehabilitation of health facilities. This will include prevention and treatment of communicable and non-communicable diseases, treatment of injuries, provision of reproductive healthcare services including clinical management of rape (CMR) services, and mental health and psychosocial support through facility- and community-based interventions. Outbreak preparedness and response measures will be maintained. To monitor the cost and quality of care especially for out of camp refugees, the refugee response will coordinate closely with WHO and the IASC health sector and align and complement its interventions.

The overall objective of the nutrition intervention is to improve the nutritional well-being of refugees and host communities. Comprehensive and integrated nutrition, health, and food security interventions are needed to attain such a result. Regular and timely nutritional screening to ensure early detection of active cases will be promoted and implemented at entry points, reception centres and camps/settlements. Treatment options for acute malnutrition will be available through services provided in refugee camps or through the national system. Treatment of acute malnutrition in refugee situations will be managed using the principles of community-based management of acute malnutrition (CMAM), as per the national CMAM treatment guideline and protocols. SAM will be treated through in-patient and out-patient platforms with nutritional treatment products.

CRP partners will coordinate with the main primary health care actors and other stakeholders to scale-up in-patient severe acute malnutrition treatment at the stabilization centres in health facilities to ensure refugees can access services. Treatment of moderate acute malnutrition (MAM) using out-patient modalities will be prioritized to provide the specialised nutrition food products required for the treatment of moderate acute malnutrition. Community outreach programmes will further detect moderate acute malnutrition through volunteers and outreach workers. Community involvement and awareness in the identification of malnourished individuals, and their inclusion and retention in the treatment of acute malnutrition is crucial in the success of this strategy, as well as in obtaining effective coverage. In emergency situations where GAM levels are high (>15 per cent with aggravating factors), it is important to ensure optimal organization and coordination of services among all partners and to maintain communications with and raise awareness among the refugee population. Further focus will be on effective prevention of undernutrition and micronutrient deficiencies with a focus on morbidity and mortality prevention associated with acute malnutrition in children under five years and pregnant and lactating women (PLW) who constitute the most vulnerable groups. Specific activities for the prevention of undernutrition include blanket supplementary feeding for young children and PLW using special nutritional products or fortified blended foods in locations with high prevalence of acute malnutrition or with high risk factors. Effective prevention of undernutrition and micronutrient deficiencies including Anaemia and stunting will be prioritized by gradually integrating refugees into the national nutrition strategy, ensuring that refugees have access to food fortification, deworming, immunization, and vitamin A/micro-nutrient supplementations. In addition, promotion of adequate Infant and Young Children Feeding (IYCF) and care practices will be prioritized both at community and facility levels. Prevention will also be assured through the improvement of the WASH situation and health conditions and improved shelter and livelihood opportunities.



LIVELIHOODS & RESILIENCE (AND SOCIO-ECONOMIC INCLUSION)

CRP Partners will implement the Livelihoods and Resilience response with one key objective:

1. Enhance self-reliance of refugees by promoting activities targeting households and individuals through conditional seasonal programmes linked to livelihoods and asset creation

Partners will work to improve access to livelihoods for refugees, promote socio-economic inclusion and thereby increase resilience. Improving refugee access to work permits remains a key priority, allowing refugees to participate in formal economies for improved employment opportunities, and to effectively mitigate protection risks posed by informal labour

and/or illicit income generating activities. In parallel, partners will prioritize provision of agricultural and livestock livelihoods support, including provision of inputs and productive assets to facilitate small-scale income generating activities or participation in seasonal labour opportunities. To promote sustainable outcomes, agricultural extension services and capacity development will be prioritized in parallel, providing refugee farmers with technical advice and inputs to strengthen agricultural production abilities. Farming interventions will integrate climate considerations and promote agricultural techniques that minimize harmful impacts on the environment.

Complementary to the Education response outlined above, partners will deliver vocational skills and language training for refugees, expanding access to educational services. Vocational skills training aligned with market demands and coupled with language education will improve employability within formal economies, securing avenues for socio-economic integration. Opportunities for small-business start-ups will also be provided, including training in financial literacy, business start-up and management, and provision of small-scale business grants to ensure access to start-up capital. Mentoring and coaching will be ensured in the entrepreneurship process. Refugee youth will be prioritized for entrepreneurship activities; however, women and vulnerable and at-risk groups will also be among key target groups.

Collaborative advocacy efforts will be made for refugee access to wage employment, and to ease administrative barriers to accessing work permits, business registration and financial inclusion within both formal and informal services.



SHELTER AND NFIS

In 2023, the Shelter and NFI sector will focus on the following objectives:

1. Provide timely NFI assistance to crisis affected populations
2. Enable crisis affected populations to access adequate shelter solutions that provide protection, safety, security, and space to live in a dignified manner



Azmera and Medhn are two refugee women who worked in construction back home in Tigray, Ethiopia and now work with Medair in Tunaydbah camp, Gedaref to build durable shelters (tukuls) to help their community live safely and in dignity. Photo: UNHCR/Afarin Dadkhah Tehrani

Emergency response will continue to be critical considering the deteriorating humanitarian situation in Sudan, compounded by chronically low resources and rising prices. Within this context it is expected that immediate needs will rise in 2023, however the S/NFI sector will continue to strive to provide not only emergency life-saving assistance but also longer-term solutions-oriented programming. To avert risks of causing further deterioration in the humanitarian context by neglecting long-term needs in favour of solely delivering life-saving activities, the SNFI sector will lead on advocacy and resource mobilization for durable shelter and settlement interventions. To break the continuously recurrent cycle of emergency response in Sudan, investments must be made into more permanent housing, public facilities, and disaster risk reduction to promote resilience and capacities to absorb cyclical shocks.

Age, gender, and diversity considerations will guide shelter and settlement design to ensure women and girls are better protected from risks of GBV, as well to ensure those with reduced mobility and other physical and mental impairments are not excluded from participating in community life. The concept of shelter adequacy also entails addressing the settlement in entirety, whereby site development interventions and provision of adequate public facilities and utilities usually require significant investment, often beyond Sudan's fundraising capacity. However, as much as resource availability allows, the sector will try to introduce and develop components of DRR through basic infrastructure rehabilitation, and to decrease the overall vulnerabilities of the most exposed communities. To both save resources and provide refugees with livelihood opportunities, the sector will leverage capacities of affected populations and seek their active participation in the response. The sector will also aim to offset negative impact on the environment by focusing on renewable materials (such as earth, fast-growing wood/grass, etc.) as well as by advocating for more permanent shelter with longer lifespans, requiring less repairs and generating less waste than emergency shelter typologies.

While a coordinated, inter-sectoral area-based response would be ideal, very often due to limited funding we must revert to point-based interventions where only the most vulnerable and at-risk households are assisted, ultimately reducing overall positive impacts on target communities. While new arrivals will benefit from blanket coverage and the full assistance package, those affected by disasters and those in protracted displacement will receive restricted and targeted assistance for the most vulnerable only. For the latter case, prioritization criteria will target women and children at-risk, older people, those with physical and mental disabilities, chronically ill, and marginalised community members.



WASH

CRP partners have identified three key objectives of the WASH response:

1. Securing access to improved safe and sufficient water sources
2. Improve access to safe, dignified, and segregated sanitation facilities
3. Improve hygiene practises through hygiene promotion

CRP partners will continue to prioritize improved access to safe and sufficient water sources, with the objective of meeting the UNHCR-standard of minimum 20 litres per person per day in refugee hosting locations. In locations where existing water sources are insufficient to meet needs on the ground, new water sources or water network extensions will be developed, while operational maintenance and rehabilitation will be prioritized in locations serviced by low-functioning or non-functioning water systems. Water quality monitoring and water treatment will also be prioritized as

critical for safe and sufficient access to water. The response will thereby deliver water treatment plants, water treatment products, and install safe water storage infrastructure supported by community-based structures. To reduce long-term costs, lower the environmental impact and increase continuous and sustainable water supply, systems are strongly encouraged to be solarized where possible.

In parallel, water harvesting technologies will continue to be explored and implemented when feasible, including hafir construction, roof catchments, and provision of water tanks to collect rainwater. With strong links between sufficient access to essential resources and peaceful inter-community relations, water resources will continue to be available also to host communities. Full access to water resources for host and refugee communities will further support the transition from a care and maintenance water supply system to an integrated supply model, based on sustainable service delivery and improved cost efficiency to best serve both communities. For improved long-term outcomes and community ownership, community-based maintenance structures will be formed, with members trained and supported on basic operation, maintenance, and repairs of water supply facilities.

To combat open defecation rates, to improve sanitation and mitigate risks of vector borne disease, WASH partners will work to improve sanitation and hygiene environments in refugee hosting areas. Partners will lead construction and rehabilitation of household level latrines where possible, and gender segregated communal latrines where needed as a GBV risk mitigation intervention. In parallel, behaviour change for improved hygiene practices and maintenance of latrine facilities will be pursued via awareness campaigns, hygiene promotion and community engagement. This approach aims to significantly reduce open defecation rates, and thereby mitigate community susceptibility to vector borne disease outbreaks. Moreover, to further combat water borne diseases, vector control activities will be scaled up, including spraying and improved garbage collection and disposal.

Personal hygiene kits will also be distributed as well as soap via general distributions. Assistance will continue to be prioritized as in-kind; however, cash-based alternatives will be explored where feasible.



A refugee woman receives a personal hygiene kit during a distribution in South Darfur. Photo: UNHCR/Hathaimat Purnananda



ENERGY & ENVIRONMENT

The energy and environment sector will focus on the following objectives:

1. Improved access to clean and sustainable energy sources
2. Increase sustainable firewood supply and environmental conservation through afforestation and reforestation
3. Increase awareness about energy and environment conservation among refugees and other stakeholders

The key objectives put forth by partners under Energy and Environment include ensuring safe access to sufficient household energy needs and to promote environmental preservation and rehabilitation. With most refugees living in remote areas where electricity is not available or is critically scarce, refugees are heavily reliant on traditional cooking methods using firewood and charcoal. These approaches leave households vulnerable to health hazards caused by smoke inhalation, protection risks during firewood collection especially for women and girls who are exposed to GBV, and harmful coping mechanisms to offset costs of charcoal and firewood. To better support refugee households to fill energy gaps, CRP partners will prioritize provision of fuel-efficient stoves, as well as provision of clean cooking fuel – specifically ethanol and liquefied natural gas (LNG). Partners are also strongly encouraged to support construction of storage tanks to preserve clean cooking gas on-site and enable regular distributions.

To promote environmental preservation and rehabilitation, partners will pursue reforestation and afforestation activities. These activities aim to promote natural landscape resilience against cyclical and natural shocks, often exacerbated by deforestation, while also mitigating the risk of inter-community tensions and barriers to peaceful coexistence through environmental conservation and sustainable natural resource management.



A South Sudanese refugee collects water at Dabat Bosin camp in White Nile State, where a water plant solarization project was undertaken to improve reliability of water distribution and reduce dependence on fossil fuels. Photo: UNHCR/Mohamed Rached Cherif



Refugee children receive an ATM card to access cash assistance from UNHCR to support their education in Khartoum State, Sudan. Photo: UNHCR/Mohamed Rached Cherif

Solarization of key infrastructure points will be conducted to avoid or reduce negative environmental impacts, reduce costs associated with fuel consumption, and to promote viability of infrastructure assets even if humanitarian partners are unable to maintain constant access to specific sites. frequently affected by security events or annual flooding events are particularly vulnerable to fuel shortages, and thereby gaps in services, when access is limited. Solarization of key infrastructure in a way that is inclusive of host communities would help to mitigate the risk of fuel shortages, while minimizing the negative environmental impact and improving the protection and wellbeing of refugees.



CASH-BASED INTERVENTIONS (CBI)

Increasing the use and coordination of cash-based interventions is part of the Grand Bargain¹¹ commitments and surveys show that more than 80 per cent of refugee households in Sudan are in favour of some form of cash assistance. Although lack of financial and communication infrastructure as well as economic instability pose challenges to introduce cash-based interventions several CRP partners have successfully implemented various forms of cash support during 2022. Partners of the Refugee Response in 2023 commit to further explore and expand cash-based interventions as modality of assistance for refugees and host communities and contribute to protection outcomes.

¹¹ <https://interagencystandingcommittee.org/grand-bargain>

Country Cross-Cutting Response Priorities



The Sudan CRP was developed after consultation with refugees, government authorities, and NGO partners. Sectoral workshops were organized to ensure partners were involved in the process. All CRP partners are committed to ensure that their planned interventions are based on beneficiaries' needs, preferences, and priorities, and reflected in the programme design and implementation. Additionally, CRP partners agreed to strengthening monitoring frameworks across the sectors to improve the quality of programming and services that are provided. The RCF will work closely with the established Sudan Accountability to Affected People and Community Engagement Working Group in Sudan.

To ensure an effective response to refugees in Sudan the refugee response will follow an Age, Gender, and Diversity approach by using participatory methodologies to promote the role of women, men, girls, and boys of all ages and backgrounds as agents of change in their families and communities. This will include the collection and analysis of disaggregated data to monitor progress. Gender equity principles will be at the core of the response to promote the empowerment and protection of diverse women and girls, children, older people, as well sexual and gender minorities. Communication with Communities will be strengthened through hotlines, suggestion boxes, SMS systems and teams of community feedback assistants. Simultaneously, communication channels will be assessed to improve two-way communication with refugees and host communities.



In celebration of Ashenda festival, Tigrayan women and girls in Tunaydbah refugee camp in Gedaref, east Sudan wear colorful dresses and traditional hairdos and sing and dance. Photo: UNHCR/Afarin Dadkhah Tehrani



Under the umbrella of the PSEA Network in Sudan, the RCF is committed to strengthen prevention, mitigation and response to Sexual Exploitation and Abuse (SEA) as a critical element to all responses covering Persons of Concern (PoC). In 2021, the RCF engaged with the Partners and PSEA Network and established the first field-level PSEA Working Group led by UNHCR in line with the Joint PSEA Action Plan. In addition, SEA assessments were undertaken to identify risks and challenges faced by the Tigray refugee population – particularly by women, girls, and boys – and what mechanisms and capacities exist to respond to any violations. RCF members have further led and engaged in interagency PSEA capacity building and awareness sessions with relevant government counterparts, ranging from police, judiciary and key government interlocutors to community volunteers and incentive workers. Partners have updated the mapping of feedback and response mechanisms and established standard operating procedures (SOPs) for safely handling complaints.

In 2022, CRP partners aim to build on achievements in 2021 to catalyse PSEA capacities, skillsets, reporting procedures, networks, and partnerships. Specifically, partners will prioritize strengthening of specialized mechanisms to address PSEA for appropriate handling of sensitive complaints, particularly in cases concerning stakeholders with duty of care for community members, including addressing staff behaviour, as well as ensuring collaboration with the GBV coordination mechanisms on GBV referral mechanisms in line with the endorsed GBV SOP in each location. Capacity building trainings targeting community members, partners, and stakeholders will strengthen protection against exploitation and abuse, and build awareness of rights, entitlements, and confidential reporting channels. Staff and volunteers will be targeted specifically, enforcing the zero-tolerance policy on SEA, and ensuring minimum standards of PSEA SOPs are upheld and maintained.

Mental Health & Psychosocial Support (MHPSS)

Chronic underfunding of national protection and health systems has impeded mental health diagnosis and treatment capacities, while exposure to conflict, displacement and shocks have been linked to growing mental illness including depression and post-traumatic stress disorder (PTSD). Immediate and long-term risk mitigation to preserve and promote mental health and psychosocial wellbeing for individuals, families and communities, form an integral part of comprehensive care underpinning positive protection and resilience outcomes. Protection and Health partners will integrate mental health and psychosocial support (MHPSS) within the refugee response framework, promoting cross-sectoral collaboration, referral pathways for access to adequate care, and integration within national services where possible.



Members of the refugee community in Nivasha Open Area in Khartoum State perform a dance in commemoration of World Refugee Day. Photo: UNHCR

Partnership and Coordination

The Refugee Consultation Forum (RCF) provides a coordination platform that brings together national, international non-governmental organizations and UN agencies. Chaired by COR and UNHCR, the RCF leads the refugee response on a strategic level and seeks complementarities among the expertise of all members. The RCF is supported at the national level by the Protection Technical Advisory Group (TAG) that covers GBV and Child Protection and ensures that protection concerns of refugees in Sudan are adequately integrated in the national refugee response strategy as laid out in the CRP. Coordination with the authorities continues to take place at federal and state levels, with extensive support from COR.

State-level Refugee Working Groups (RWG) are established in refugee hosting states to lead the operational response. RWGs have been established in Khartoum, Kassala, Gedaref, Blue Nile, White Nile, South and West Kordofan and Central, East, South, and North Darfur.

The coordination of the refugee response works in close cooperation with the IASC coordination structure. While UNHCR maintains its leadership role in the refugee response there is increased cooperation on sectoral level between the two coordination structures in Sudan to facilitate integration of refugees into public services and standardize assistance packages.

In 2014, Sudan promulgated the Counter Human Trafficking Act (CHTA). Under this law, the National Committee for Combating Human Trafficking (NCCT) was established as the highest authority for combating and addressing the causes of human trafficking. Mixed migration and counter trafficking responses are coordinated through the State Committee on Counter-trafficking (CCT) in Kassala, chaired by Kassala Ministry of Social Welfare and supported by UNHCR, and the East Sudan Mixed-Migration Working Group.

The CRP supports Sudan's pledges at the GRF and engages with development actors to ensure that development interventions include refugees and host communities where appropriate and possible. The refugee response also involves relevant donors and development partners to further build political, financial, and technical support for the implementation of the GRF pledges and the National Strategy on Solutions.

The RCF works in close cooperation with the IASC coordination structure and the Sudan Humanitarian Fund (SHF) to promote localization. In accordance with the Grand Bargain, partners appealing for financial resources in the CRP aspire to channel at least 25 per cent of the funding through local actors and promote their role in the response.

As a basis for addressing its key priorities, strengthening partnership, and enhancing the overall effectiveness of the Sudan CRP, all partners have committed to align CRP activities with national strategies and to work closely with refugee and host communities. Accordingly, this plan has been prepared based on assessments and consultations with all stakeholders, including government authorities, NGO partners, donors, and refugees.



Notes: This list only includes appealing organizations under the CRP, many of which collaborate with implementing partners to carry out CRP activities.

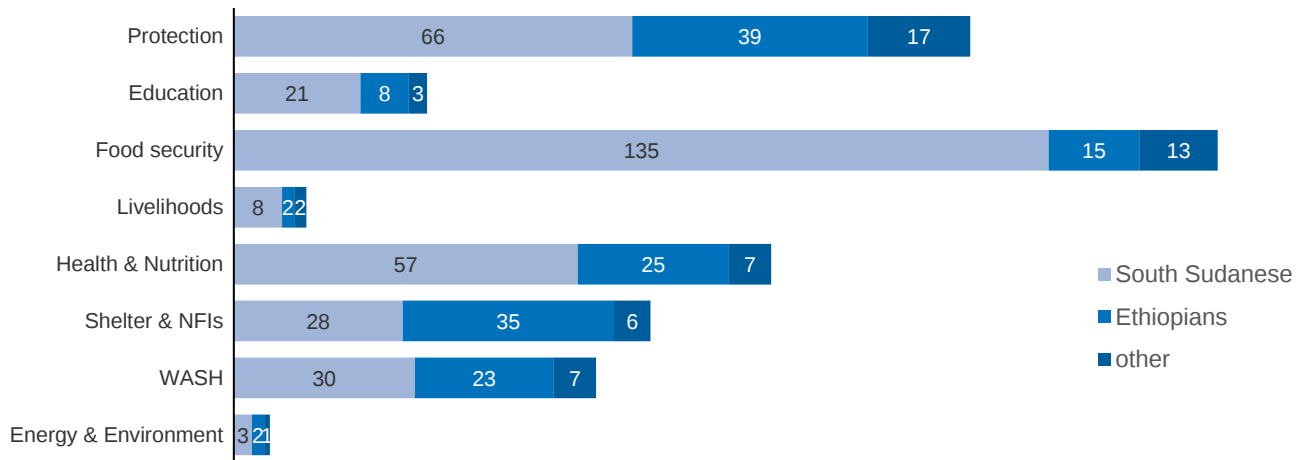
Inter-Agency Financial Requirements



¹² Including refugees and asylum-seekers from Eritrea, Syria, Chad, CAR, Yemen

Budget summary by sector

Million in USD



Total Protection requirements

\$122,496,419



Total Cash Assistance requirements*

\$ 56M

10% of total

Other protection activities

\$83,260,894

68% of total

GBV

\$21,088,852

17% of total

Child Protection

\$18,146,673

15% of total

* This is a breakdown by sector of the requirements for cash assistance which are included in the above total sectoral budgets. Cash assistance is pursued and reflected as a key modality of assistance and protection in line with UNHCR's CBI Policy 2022-2026. Cash assistance is used as a cross-cutting modality across the various sectors, including protection, and is budgeted for accordingly and in line with a basic needs approach. As the modality of choice of people we serve, cash assistance will be used as the primary means to meet immediate basic needs and provide important protection outcomes.

Budget summary by partner type

41



Partners involved



UN Agencies

\$483,543,799



International NGOs

\$64,604,158



National NGOs

\$7,427,433



IFRC & RC

\$292,400

Budget Summary by Partner

Partner	Acronym / Short Title	Type	Requirements in US\$
Agency for Technical Cooperation and Development	ACTED	INGO	1,500,000
Adventist Development and Relief Agency	ADRA	INGO	1,746,000
Al Manar Voluntary Organization	Almanar	NNGO	1,295,238
Alight	ARC/Alight	INGO	2,852,525
Alsalam Organization for Rehabilitation and Development	AORD	NNGO	999,400
Catholic Agency for Overseas Development	CAFOD	INGO	2,027,041
Care International Sudan	CARE	INGO	3,800,000
Concern Worldwide	Concern	INGO	1,656,000
Cooperazione Internazionale	COOPI	INGO	3,917,000
Danish Refugee Council	DRC	INGO	1,200,000
Friends of Peace and Development Organization	FPDO	NNGO	987,625
Global Aid Hand	GAH	NNGO	564,915
Hope and Friendship for Development Organization	HOPE	NNGO	1,050,000
Human Appeal	HA	INGO	704,127
Healthcare Foundation Organization	HFO	NNGO	200,000
International Organization for Migration	IOM	UN	20,500,000
International Rescue Committee	IRC	INGO	5,449,109
Islamic Relief Worldwide	IRW	INGO	2,660,000
JASMAR	JASMAR	NNGO	458,640
Medair	Medair	INGO	2,965,000
Medical Teams International	MTI	INGO	2,733,500
Mercy Corps	MC	INGO	2,600,000
Mutawinat	Mutawinat	NNGO	1,071,615
Norwegian Church Aid	NCA	INGO	395,119
Norwegian Refugee Council	NRC	INGO	14,100,000
Plan International Sudan	Plan Int.	INGO	2,919,364
Practical Action	PA	INGO	2,177,900
Premier Urgence	PUI	INGO	850,000
Relief International	RI	INGO	2,077,253
Save the Children International	SCI	INGO	530,600
Sudanese Red Crescent	SRCS	RCRC	292,400
United Nations Population Fund	UNFPA	UN	20,377,358
United Nations High Commissioner for Refugees	UNHCR	UN	221,277,511
United Nations Children's Fund	UNICEF	UN	40,133,200
United Nations Office for Project Services	UNOPS	UN	2,000,000
United Peace Organization	UPO	NNGO	1,000,000
World Food Programme	WFP	UN	164,805,730
Welthungerhilfe	WHH	INGO	2,057,000
World Health Organization	WHO	UN	14,450,000
World Vision International	WVI	INGO	2,482,620
ZOA International Sudan	ZOA	INGO	1,204,000
Total:			\$556,067,790

Country Monitoring Results

Sector		Indicator	Target
	Protection	# of persons receiving legal counselling assistance	25,000
		# of persons attending general protection awareness campaigns	265,047
		# of community-based structures established or maintained (CPBNs, community reconciliation committees, youth networks, etc.)	500
		# of people that receive cash under MPCA at full instalment	122,074
		# of people that receive cash under MPCA at half	122,074
		# of service providers trained on protection approaches or issues	1,180
		# of advocacy interventions undertaken on protection issues	118
		# of new asylum seekers and refugees individually registered at the end of reporting period	311,641
		# of identity documents issued to refugees and asylum-seekers.	530,094
		# of asylum seekers undergone individual RSD	5,000
		# of persons receiving individual protection services (cash or in-kind)	26,905
		# of people accessing lasting solutions (resettlement and complementary pathways)	1,000
	Child Protection	# Refugee children receiving individual case management	52,492
		# of permanent safe spaces furnished and maintained according to minimum standards	50
		# UASC placed in appropriate interim or long-term alternative care	15,000
		# of identified UASC that are reunified with their families	2,500
		# of women, men, boys, and girls of community-based child protection structures trained on CP related training	5,381

		# of children assisted with civil status registration or documentation	96,253
		# of children with disability reached with direct services to improve their care and wellbeing	7,874
		# of women, men, boys, and girls participating in awareness raising activities on CP issues	372,667
	GBV	# of identified SGBV survivors assisted with appropriate support	23,719
		# of campaigns to raise awareness about GBV	5,381
		# of people trained on GBV topics	5,900
		# of GBV survivors receiving individual case management	11,569
		# of persons receiving MHPSS service	29,353
	 Education	# of children supported with daily HEB/hot school meal/take-home food ration equivalent	154,490
		# Teacher kits provided to primary or secondary school teachers	2,579
		# Teachers trained	2,579
		# School uniforms provided to primary or secondary school children	154,490
		# School furniture sets provided to primary schools	2,579
		# Classroom kits provided to primary or secondary school classrooms	2,579
		# Teachers (primary or secondary schools) who received a teacher incentive	2,579
		# Classrooms constructed (primary and secondary)	200
		# Classrooms rehabilitated (primary and secondary)	200
		# School latrines (gender segregated) constructed (to universal design to accommodate children with disabilities)	2,226
		# School latrines (gender segregated) rehabilitated (modified to universal design to accommodate children with disabilities)	2,226
		# Handwashing stations (permanent/semi-permanent) constructed	2,579

		# Handwashing stations (permanent/semi-permanent) rehabilitated	2,579
		# Schools provided with cleaning kits	2,579
		# Schools trained on COVID19 school protocols	2,579
	Food security	# of people that receive a full ration of food	663,159
		# of people that receive a half ration of food	--
	Health & Nutrition	# of children that received outpatient SAM treatment (OTP	11,730
		# of children that received inpatient SAM treatment (SC)	5,865
		# of children that received MAM treatment (TSFP)	43,303
		# of PLW received MAM treatment (TSFP)	48,499
		# of children that received micronutrient supplements	37,537
		# of children that received vitamin A supplements	37,537
		# of women received IYCF counselling	37,537
		# of children received BSFP services	37,537
		# of PLW received BSFP services	23,461
		# of outpatient consultations conducted.	645,191
		# of trauma consultations supported	56,167
		# of mental health consultations conducted	74,727
		# of physical rehabilitation sessions conducted.	1,000
		# of antenatal care visits conducted.	56,776
		# of vaginal deliveries attended by a skilled attendant	22,913
		# of caesarean deliveries attended by a skilled attendant.	11,457
		# of postnatal sessions conducted.	56,776
		# of cases referred for specialized treatment (between levels of care across Sudan)	18,394
		# of admissions to receive inpatient treatment.	161,298

		# of supported mobile medical units.	62
		# of health staff trained/re-trained on different health topics	1,500
		# of health facilities refurbished or rehabilitated	20
	Livelihoods & Resilience (and Socio-Economic Inclusion)	# of people receiving agricultural support	85,329
		# of people receiving livestock support	35,177
		# of people receiving business entrepreneurship/vocational skills training	21,524
		# of youth supported	69,875
	Shelter & NFIs	# of households that received NFI kits	85,000
		# of households that received emergency shelter kit	50,000
		# of households that received tent	25,000
		# of households that received construction materials	20,000
		# of households that received durable shelters	15,000
		# of households that received cash/voucher for emergency/improved shelter	20,000
		# of households that received cash/voucher for transitional/durable shelter	15,000
		# of site maintenance activities implemented	100
		# of households trained	10,000
	WASH (and Energy & Environment)	# of hand pumps installed	1,507
		# of water yards installed	50
		# of treatment plants installed	10,048
		# of new hafirs constructed	50
		# of handpump rehabilitated	1,507
		# of water yards rehabilitated	50

	# litres provided per person per day	16
	# of water sources maintained	5,024
	# of shared/non-shared between two household latrines installed	20,097
	# of communal (in camps and other communal locations of 4-5 stances) latrines installed	10,048
	# of shared/non-shared between two household latrines rehabilitated	17,231
	# of communal (in camps and other communal locations of 4-5 stances) latrines rehabilitated	10,048
	# of households that received soap	100,484
	# of households that received jerrycans	100,484
	# of hand washing facilities constructed	10,048
	# of women receiving sanitary materials	172,869
	# of people reached by campaigns in communal set ups	502,421
	# of communal vector control activities	1,129
	# Metric tons of garbage disposed by solid waste management	--
	# of water systems running on solar power	50
	# of shower blocks/ bathing facilities constructed	10,048
	# of shower blocks/bathing facilities rehabilitated	10,048
	# of refugee households who received fuel per month	32,818
	# of refugee HH having energy saving stove and equipment	32,818
	# of persons trained on clean energy sources	32,818
	# of solar lights installed	16,409
	# of hectares of trees planted	10,000
	# of refugee households provided with solar torches/ lamp	32,818

Annexes

1. Priority localities

State	Locality	Target	CRP priority	Description
Khartoum	Jebel Awlia	27,073	1	Khartoum open area
Khartoum	Sharg An Neel	50,016	1	Khartoum open area
Kassala	Reifi Wad Elhilaiv	57,233	1	Shagarab, Girba, Abuda refugee camps, Hamdayet border point
Gedaref	Al Fashaga	3,275	1	Um Gargour refugee camp, village 8 transit site
Gedaref	Basundah	2,162	1	Babikri refugee camp, Taya border point
South Kordofan	Al Leri	17,520	1	camp-like settlement, border point
White Nile	Aj Jabalain	62,688	1	Al Alagaya, Dabar Bosin refugee camp
Blue Nile	Wad Al Mahi	8,342	1	camp 6 refugee camp
Khartoum	Um Bada	17,787	1	Khartoum open area
North Darfur	Al Lait	22,817	1	rural settlement
East Darfur	Bahr Al Arab	37,121	1	Kario refugee camp
East Darfur	Al Firdous	5,763	1	rural settlement
Central Darfur	Azum	8,313	1	Um Shalaya refugee camp
South Darfur	Damso	2,191	2	camp-like settlement
South Darfur	Beliel	5,650	2	Beliel refugee camp
West Kordofan	Ghubaish	6,300	2	rural settlement
South Darfur	Al Radoum	11,130	2	camp-like settlement, border point
East Darfur	Abu Jabrah	11,007	2	rural settlement
West Kordofan	Keilak	8,519	2	rural settlement
South Kordofan	At Tadamon - SK	1,004	2	rural settlement
West Kordofan	Al Dibab	3,058	2	rural settlement
West Kordofan	Abyei	6,133	2	rural settlement
West Kordofan	Al Meiram	14,029	2	camp-like settlement, border point
West Kordofan	Babanusa	6,515	2	rural settlement
South Kordofan	Abu Jubayhah	11,798	2	camp-like settlement, border point
West Kordofan	As Salam - WK	2,517	2	urban area
Kassala	Reifi Kassla	2,511	2	Wad Sherife refugee camp
Kassala	Reifi Khashm Elgirba	678	2	Kilo 26 refugee camp

East Darfur	Assalaya	10,288	2	Al Nimir refugee camp
Gedaref	Al Mafaza	21,698	2	Tunaydbah refugee camp
Gedaref	Galabat Ash-Shargiah	16,311	2	Um Rakuba refugee camp
Kassala	Halfa Aj Jadeedah	1,170	2	rural settlement
North Darfur	Al Fasher	1,387	2	urban area
East Darfur	Abu Karinka	2,457	2	rural settlement
South Darfur	Um Dafoug	2,524	2	camp-like settlement
White Nile	Kosti	40,690	2	urban area
White Nile	As Salam / Ar Rawat	115,001	2	Jouri, Al Redis, Al Kashaf refugee camps
Khartoum	Khartoum	109,069	2	urban area
Central Darfur	Zalingi	1,472	2	urban area
East Darfur	Ad Du'ayn	1,498	2	urban area
South Darfur	As Salam - SD	1,241	3	rural settlement
West Kordofan	An Nuhud	5,448	3	rural settlement
West Kordofan	Al Lagowa	67	3	rural settlement
West Kordofan	Al Idia	2,663	3	rural settlement
South Darfur	Buram	3,872	3	rural settlement
South Darfur	Nyala Janoub	15,310	3	urban area
East Darfur	Yassin	616	3	rural settlement
North Kordofan	Sheikan	6,164	3	camp-like settlement
Gedaref	Gala'a Al Nahal	19	3	potential site
East Darfur	Adila	8,554	3	rural settlement
South Kordofan	Habila - SK	333	3	rural settlement
South Kordofan	Kadugli	1,520	3	urban area
West Kordofan	Abu Zabad	789	3	rural settlement
South Kordofan	Dilling	837	3	rural settlement
South Kordofan	Al Quoz	316	3	rural settlement
South Kordofan	Ar Rashad	194	3	rural settlement
Kassala	Madeinat Kassala	38,178	3	urban area
Gedaref	Wasat Al Gedaref	14,213	3	urban area
Khartoum	Karrari	28,851	3	urban area
		865,900		

2. Severity indicators

Sector	Severity indicator
Protection	% of children identified at risk % of women identified at risk % of HHs in which some members do not have at least one type of documentation
Education	% OOSC Refugee Children % IPC3+
Health	% of children aged 9 months to 15 years who have received measles vaccine % of individuals who take more than one hour to reach to the nearest health facility % of deliveries in health facilities
Shelter/NFI	% of HHs whose dwellings provide a space to live in a dignified manner with adequate levels of privacy, security and protection from exposure, with low risk of failure in predictable hazards. % of HHs with access to basic household items % of HHs without clear security of tenure within their community % of HH with access to adequate settlement situation with basic infrastructure and essential services
WASH	% Households with access to improved drinking water source within 30 minutes % HHs that have problems related to water access or quality of water % Households using an improved toilet facility, not shared
FSL	IPC
Nutrition	- Prevalence of Global Acute Malnutrition (GAM) based on weight for height Z-score (WHZ)<-2 and/or bilateral oedema among children 0-59 months - Prevalence of Global Acute Malnutrition (GAM) based on Mid-Upper Arm Circumference (MUAC)<210-230 (depending on the contexts) and/or bilateral oedema among Pregnant and Lactating Women (PLW)



Refugees coming together to set up shelter for new arrivals in El Radoum, South Darfur. Photo: UNHCR/Behrooz Taleb

3. Detailed budget overview

Partner	Protection	Education	FSL	Heath & Nutrition	Shelter/NFI	WASH	Energy & Environment	TOTAL
ACTED	\$0	\$0	\$0	\$0	\$1,500,000	\$0	\$0	\$1,500,000
ADRA	\$651,000	\$420,000	\$340,000	\$0	\$0	\$335,000	\$0	\$1,746,000
Almanar	\$794,653	\$0	\$0	\$500,585	\$0	\$0	\$0	\$1,295,238
ARC/Alight	\$685,250	\$0	\$0	\$1,102,600	\$399,375	\$665,300	\$0	\$2,852,525
AORD	\$408,500	\$188,000	\$152,900	\$0	\$0	\$250,000	\$0	\$999,400
CAFOD	\$449,041	\$0	\$140,000	\$0	\$168,000	\$1,070,000	\$200,000	\$2,027,041
CARE	\$0	\$0	\$1,100,000	\$1,700,000	\$0	\$1,000,000	\$0	\$3,800,000
Concern	\$0	\$0	\$450,000	\$790,000	\$0	\$416,000	\$0	\$1,656,000
COOPI	\$0	\$0	\$500,000	\$0	\$2,667,000	\$750,000	\$0	\$3,917,000
DRC	\$1,200,000	\$0	\$0	\$0	\$0	\$0	\$0	\$1,200,000
FPDO	\$383,600	\$0	\$369,134	\$234,891	\$0	\$0	\$0	\$987,625
GAH	\$159,915	\$225,000	\$100,000	\$0	\$0	\$80,000	\$0	\$564,915
HOPE	\$0	\$0	\$350,000	\$0	\$0	\$700,000	\$0	\$1,050,000
HA	\$381,057	\$0	\$323,070	\$0	\$0	\$0	\$0	\$704,127
HFO	\$0	\$0	\$0	\$200,000	\$0	\$0	\$0	\$200,000
IOM	\$0	\$0	\$0	\$300,000	\$7,200,000	\$13,000,000	\$0	\$20,500,000
IRC	\$2,390,704	\$0	\$0	\$2,000,000	\$0	\$1,058,405	\$0	\$5,449,109
IRW	\$492,800	\$700,000	\$0	\$621,600	\$0	\$845,600	\$0	\$2,660,000
JASMAR	\$189,440	\$117,900	\$0	\$0	\$0	\$151,300	\$0	\$458,640
Medair	\$0	\$0	\$0	\$750,000	\$2,215,000	\$0	\$0	\$2,965,000
MTI	\$0	\$0	\$0	\$2,733,500	\$0	\$0	\$0	\$2,733,500
MC	\$200,000	\$400,000	\$500,000	\$400,000	\$300,000	\$800,000	\$0	\$2,600,000
Mutawinat	\$1,071,615	\$0	\$0	\$0	\$0	\$0	\$0	\$1,071,615
NCA	\$0	\$0	\$0	\$300,000	\$0	\$95,119	\$0	\$395,119
NRC	\$2,600,000	\$3,200,000	\$1,900,000	\$0	\$4,900,000	\$1,500,000	\$0	\$14,100,000
Plan Int.	\$975,000	\$364,364	\$400,000	\$800,000	\$0	\$120,000	\$260,000	\$2,919,364
PA	\$0	\$0	\$485,000	\$0	\$0	\$1,242,000	\$450,900	\$2,177,900
PUI	\$0	\$0	\$0	\$850,000	\$0	\$0	\$0	\$850,000
RI	\$0	\$0	\$0	\$900,000	\$0	\$1,177,253	\$0	\$2,077,253
SCI	\$165,600	\$365,000	\$0	\$0	\$0	\$0	\$0	\$530,600
SRCS	\$99,400	\$0	\$0	\$0	\$0	\$93,000	\$100,000	\$292,400
UNFPA	\$7,383,625	\$0	\$0	\$12,993,733	\$0	\$0	\$0	\$20,377,358
UNHCR	\$94,682,519	\$17,853,318	\$3,578,249	\$22,781,487	\$50,364,417	\$26,511,636	\$5,505,885	\$221,277,511
UNICEF	\$5,350,000	\$8,440,000	\$0	\$19,780,000	\$0	\$6,563,200	\$0	\$40,133,200
UNOPS	\$0	\$0	\$0	\$2,000,000	\$0	\$0	\$0	\$2,000,000
UPO	\$300,000	\$0	\$200,000	\$0	\$0	\$500,000	\$0	\$1,000,000
WFP	\$0	\$0	\$162,346,606	\$2,459,124	\$0	\$0	\$0	\$164,805,730
WHH	\$772,000	\$0	\$70,000	\$120,000	\$465,000	\$280,000	\$350,000	\$2,057,000
WHO	\$0	\$0	\$0	\$13,500,000	\$0	\$950,000	\$0	\$14,450,000
WVI	\$710,700	\$345,230	\$338,000	\$817,890	\$0	\$270,800	\$0	\$2,482,620
ZOA	\$0	\$0	\$1,204,000	\$0	\$0	\$0	\$0	\$1,204,000
Total: \$556,067,790								

SUDAN

COUNTRY REFUGEE RESPONSE PLAN

January – December 2023



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