

HIGHLIGHTS

- At least 1,600 South Sudanese refugees (320 families) have relocated to the Bantiu 'open area' following the 5-6 June attacks on South Sudanese in Omdurman.
- There is risk of more attacks on South Sudanese refugees in Khartoum, UNHCR said.
- In East Darfur, a team from the State Ministry of Health carried out last week a rapid needs assessment of an estimated 4,000 people who were displaced to Ed Daein town from the Hijilij village.
- UNICEF delivered life-saving items – surgical kits, resuscitators, midwifery and obstetric kits - to address maternal health needs in hospitals in Khartoum and Omdurman.
- Child protection partners are providing psychological first aid to children, adolescents and their caregivers in Khartoum.



Map Sources: UNCS, SIM, Natural Earth.
 The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Final boundary between the Republic of Sudan and the Republic of South Sudan has not yet been determined. Final status of the Abyei area is not yet determined. Map created in Jan 2012.

SITUATION OVERVIEW

The UN refugee agency (UNHCR) has confirmed that at least 1,600 South Sudanese refugees (320 families) have relocated to the Bantiu 'open area' following the 5-6 June attacks on South Sudanese in Omdurman. UNHCR received reports of about nine refugees killed, seven injured and two missing in the larger Khartoum area, according to refugee communities. UNHCR has also received reports of sexual violence cases from survivors. UNHCR is following up to ensure survivors have access to support services. There is risk of more attacks on South Sudanese refugees in Khartoum, UNHCR said as some refugees in other 'open areas' in Omdurman and Bahri have reported that host communities are accusing them of being responsible for the increased criminality in Khartoum and have demanded that refugees leave their settlements. There are close to 290,000 South Sudanese refugees in Khartoum State, according to UNHCR.

In White Nile State, approximately 200 South Sudanese refugees who survived the 5-6 June attacks in Omdurman, Khartoum, have moved to Um Sangour camp in White Nile State. UNHCR and the Commission for Refugees (COR) are working to ensure they have access to non-food items and food assistance. There has been an increase in robberies in White Nile refugee camps targeting basic services equipment, with incidents likely linked to the decline in government services and opportunistic theft during Eid celebrations when security vigilance decreases. On 12 June, a South Sudanese refugee man was shot dead on in Khor Al Waral camp, UNHCR and COR visited the camp to follow up and the police is investigating the case.

In eastern Sudan, following inter-tribal clashes in Girba on 5-6 June, a mediation committee has been formed with tribal leaders in Kassala State to address the conflict. The situation remains tense in Girba camp and in town. A curfew has been imposed in the camp and town. On 12 June, no-show rates were higher than normal for the World Food Programme's (WFP) regular food voucher distribution in Girba camp. Contracted supermarkets for the vouchers are also closed due to lack of stock linked to disrupted transportation from Khartoum. WFP resumed the voucher distribution on 16 June and plan to finalise it on 18-19 June.

In East Darfur, a team from the State Ministry of Health carried out last week a rapid needs assessment of an estimated 4,000 people who were displaced to Ed Daein town from the Hijilij village east of Ed Daein following clashes between two communities following a dispute over the ownership of a farm in the area.

In Khartoum, the main public and private hospitals are functioning, including obstetric departments, except Al Moalim Hospital. Transport of staff is supported by WHO until the end of the week. The Ministry of Health has requested WHO to support Al Moalim hospital repair and provision of supplies.

The nation-wide disruption of internet services and unreliable phone network since 3 June continue to affect humanitarian operations. Several humanitarian partners in West Kordofan reported last week that they did not have phone or internet access.

In an unprecedented move, the reopening of schools across Sudan, including the capital Khartoum, scheduled for 16 June has been postponed by two weeks.

RESPONSE

A WHO airlift of emergency surgical supplies that is expected to reach Sudan on 18 June has been cleared. Fifteen trauma kits and 15 surgical supplies sufficient for 3,000 surgical cases (funded by USAID) will be divided between Khartoum (supplies for 1,100 cases) and other states affected by the events of 3 June and after. Also, additional surgical supplies by Italian Cooperation will be received in 2-3 days.

Many children, mostly adolescents are at heightened risk of violence, exploitation and abuse given the current situation. The UN Children's Fund (UNICEF) is working with the National Council on Child Welfare, international and local partners to ensure the safety and wellbeing of the most vulnerable children, especially those living on and off the street and are separated or unaccompanied.

UNICEF's April 2019 assessment confirmed that there were over 300 children who were living in and around the sit in areas and many more adolescent children were visiting the sit-in site daily. Despite the challenges of reaching the children with critical services and information, including provision of psychosocial support, life skills, health, education and referral services, children were also being registered to find durable solutions, including family tracing and reunification. Teams are carrying out life-saving psychosocial support for the young people in Sudan, who have been severely impacted by the recent events. Peer to peer counselling for adolescents is set to begin in the coming days so they can participate in helping spread awareness in their communities and beyond. UNICEF is working with civil society partners to widen its reach and support to include survivor centric need-based support and services through referrals.

Child protection partners are providing psychological first aid to children, adolescents and their caregivers through community-based support systems and health centres in Khartoum. So far, 485 children (288 boys, 192 girls) and 20 adults (12 female, 8 male) have been reached with these services. Two mobile teams are providing psychological first aid and information to families supporting mainly communities in Omdurman and Bahri. Child protection partners are currently completing a service mapping to address violence against children and develop/update the referral pathways. Despite challenges with communication and road access, protection actors are coordinating timely referrals to health and psychosocial support services.

Information, education and communication key messages on protection of children and adolescents and access to services have been developed and are being disseminated to community members through neighbourhood watch, community-based child protection networks and youth committees.

However, there are also some challenges, including information dissemination channels are very few (no hotline). Partners are considering disseminating key messages on prevention, risk mitigation and access to services through community radios. There are no partners able to conduct detention monitoring. The capacity of protection workers and community-based protection mechanisms are overstretched, and there is need for additional personnel and capacity development of the existing protection workers. Moreover, there are no special spaces for children and adolescents, most of them are confined to their homes, with depression levels reported as extremely high, and no targeted response for adolescents.

UNFPA is providing maternity hospitals in the larger Khartoum area with required items for caesarean section and other obstetric surgical intervention, including resuscitation for mothers and babies, and management of common complications. Support is in pipeline for both Soba and Saad Abuelella, which are major public hospitals providing maternity health services in central and south Khartoum

To address the urgent maternal and child health needs, UNICEF delivered to the Ministry of Health, a number of vital health supplies. The life-saving items include surgical kits, resuscitators, midwifery and obstetric kits to immediately address maternal needs. The Ministry of Health will be distributing these health supplies to various hospitals in Khartoum and Omdurman. To boost the capacity of the cold chain and the storage capacity, 20 generators (80KVs) are currently under distribution in different health services points in Khartoum and other states.

In addition, the provision of soap is underway to the eleven hospitals in Khartoum currently taking care of the wounded people.

In Tawila, North Darfur in collaboration with IOM and a partner, UNICEF is supporting the chlorination of 26 water sources covering the whole town, including flood affected communities and IDP camps. UNICEF has provided soap covering the 7,560 IDPs in the affected camps in Tawila; in addition to providing 485 jerry cans to 485 IDP families for water storage.

UNICEF is currently supporting UNHCR to respond to the needs of 320 recently displaced South Sudanese Refugee population in Bantiu in Jabal Awliya locality, one of the Khartoum open areas by providing two jerry cans per family to manage water handling and storage needs.

With UNICEF support, the Ministry of Education will provide supplies for more than 105,000 children, including refugees in Khartoum state. These include pupil kits, teacher kits, recreation kits, dignity kits, black boards, and school uniforms.

A large shipment of Ready-to-Use Therapeutic Food (RUTF), therapeutic milk and medication used for the treatment of malnutrition, is ready to be received by communities most in need. UNICEF is transporting 22,000 cartons containing 3.3 million sachets of RUTF for 22,000 children under 5, who suffer severe acute malnutrition, to Kassala, Gedaref, East, North and West Darfur, South Kordofan and Blue Nile states. All remaining states have already received RUTF and other life-saving supplies.

In Ed Daein, East Darfur, the state Ministry of Health and WHO are providing since 11 June mobile clinic services to 4,000 new IDPs from Hijilij. Sanitation department from state Ministry of Health with support from WHO also provide 200 cartons of soaps, 900 jerry cans and constructed temporary latrines.