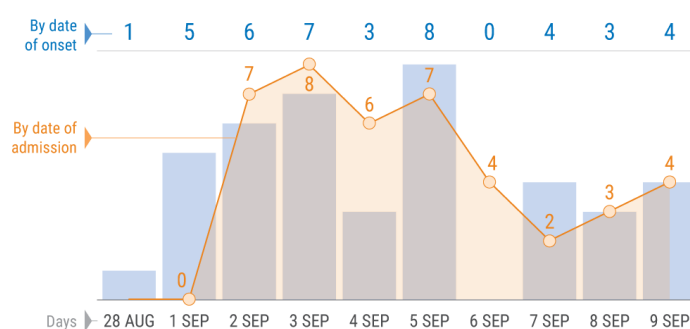


HIGHLIGHTS (9 minutes ago)

- Sudan's Federal Minister of Health Dr. Akram El Tom confirms 4 cholera cases in Blue Nile State. There are total of 41 suspected cholera cases, with two deaths reported.
- On 10 September, the national Cholera Task Force was activated by the Federal Ministry of Health and WHO.
- FMoH, WHO and UNICEF provided AWD kits to treat over 300 people. More kits will be delivered shortly.
- State Ministry of Health in Blue Nile and UNICEF are supporting the water chlorination activities and hygiene awareness in AWD-affected areas.

Number of AWD suspected cases by date of onset and date of admission, Blue Nile as of 9 September 2019



KEY FIGURES

346,300 Total affected population

16 States affected (reported HAC & Partners)

41,514 Homes destroyed

27,742 Homes damaged

FUNDING (2019)

\$1.1B Required

\$376.3M Received



FTS: <https://fts.unocha.org/appeals/670/summary>

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EMERGENCY RESPONSE (9 minutes ago)

Sudan's Federal Ministry of Health Confirms Cholera in Blue Nile State

Sudan's Federal Ministry of Health (FMoH) announced on 10 September that four out of the six samples obtained from patients with acute diarrhoea were positive for Vibrio cholera at the National Public Health Laboratory (NPHL). Cholera is an acute diarrhoeal infection caused by ingestion of food or water contaminated with the bacterium Vibrio cholerae.

As of 9 September 2019, a total of 41 suspected cholera cases, with two deaths - case fatality rate (CFR) of 3.57 per cent - were reported from Blue Nile State. With proper treatment, the case fatality rate for cholera should remain below 1 per cent. The first documented case was reported on 2 September 2019 from the Ganis Sharig (East) area in El Roseires town in Blue Nile. Four out of seven localities in Blue Nile reported suspected cholera cases, with the majority of cases reported in El Roseires (36 cases), Damazine (3 cases), Wad Almahi and Geissan with a single case each.

WHO commends the new Government of Sudan with regard to transparency and full implementation of the international health security measures and protocols in the country. The world health body also congratulated the Federal Minister of Health Dr. Akram El Tom on agreeing to announce confirmed cholera cases following taking the oath to lead the health sector in Sudan.

AWD and cholera response

On 10 September, the national Cholera Task Force (CTF) was activated by FMoH and WHO. They agreed on standard tools for collection, analysis and sharing surveillance data regarding acute watery diarrhea (AWD). AWD (one of the three clinical types of diarrhoea) lasts for several hours or days, and includes cholera, according to WHO. FMoH and WHO have distributed case definitions, treatment protocols, controlled temperature chain (CTC) infection prevention and control (IPC) guidelines, and other relevant documents. Further support will be provided by WHO for Rapid Response Team (RRT) training, deployment and supervision.

FMoH, WHO and UNICEF have already provided AWD kits (enough to treat 300 people) with three additional kits in the pipeline—one of which will reach Damazine on 11 September. In addition, IV fluids (Ringer lactate) and oral rehydration therapy supplies have already been provided for treatment of the patients. The timely clearance and movement of supplies will be critical to an effective response.

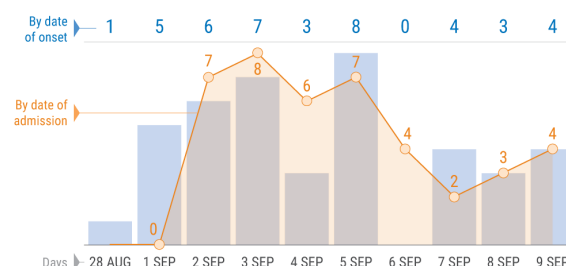
The State Ministry of Health (SMoH) in Blue Nile in partnership with UNICEF is supporting the water chlorination activities and hygiene awareness in AWD-affected areas of Blue Nile at household levels. A total of 604 home visits were carried out in the last three days in the Ganis area. All these houses were covered with awareness sessions and disinfected with chlorine. The 604 households received 6,040 bars of soap.

Water chlorination activities are underway at eight water sources connected with urban water network in both Damazine and Roseries towns. In addition, several open water sources have been chlorinated through volunteers who are working actively at the intake area and other open sources. The volunteers managed to chlorinate 1,340 donkey carts, 5200 jerrycans at water sources. OXFAM has installed two water tanks in the Ganis area of El Roseires town, which clean drinking water to the affected people.

Community Engagement and Prevention

Efforts to implement a communication strategy at the national and locality levels to empower the community are being ramped up. The health promotion department in SMoH and humanitarian partners are carrying out advocacy campaigns to raise awareness and promote prevention activities. Two hundred health promotion and community members (i.e., adolescent and youth groups) have been trained and will lead community engagement activities. These activities will focus on house-to-house visits, drama groups and mobile cinema.

Number of AWD suspected cases by date of onset and date of admission, Blue Nile as of 9 September 2019



Water sample results from Blue Nile 8 September 2019

S.N	Site	FRC level (Free Residual Chlorine)*	E.coli	Remarks
1	Soba water station	1.6	Zero	Acceptable Chlorine level and no contamination
2	El Roseires water station	0.1	Zero	Low chlorine
3	Nearest house to Alwouhda well (Alnir Idriss)	0.1	3	Low chlorine with contamination
4	Nearest house to Alimtidad Janoob well (Mohammed Ibrahim)	0.01	19	Low chlorine with contamination
5	Gogish water station (Ed Damazine locality)	0.64	On process	Low chlorine
6	Water samples from household and government facilities in Ed Damazine localities (summary result)	0.01	On process	Low chlorine

* Standard FRC level is 0.2 – 0.5 Mg/Lt. During outbreaks high level of FRC at discharge point is recommended.

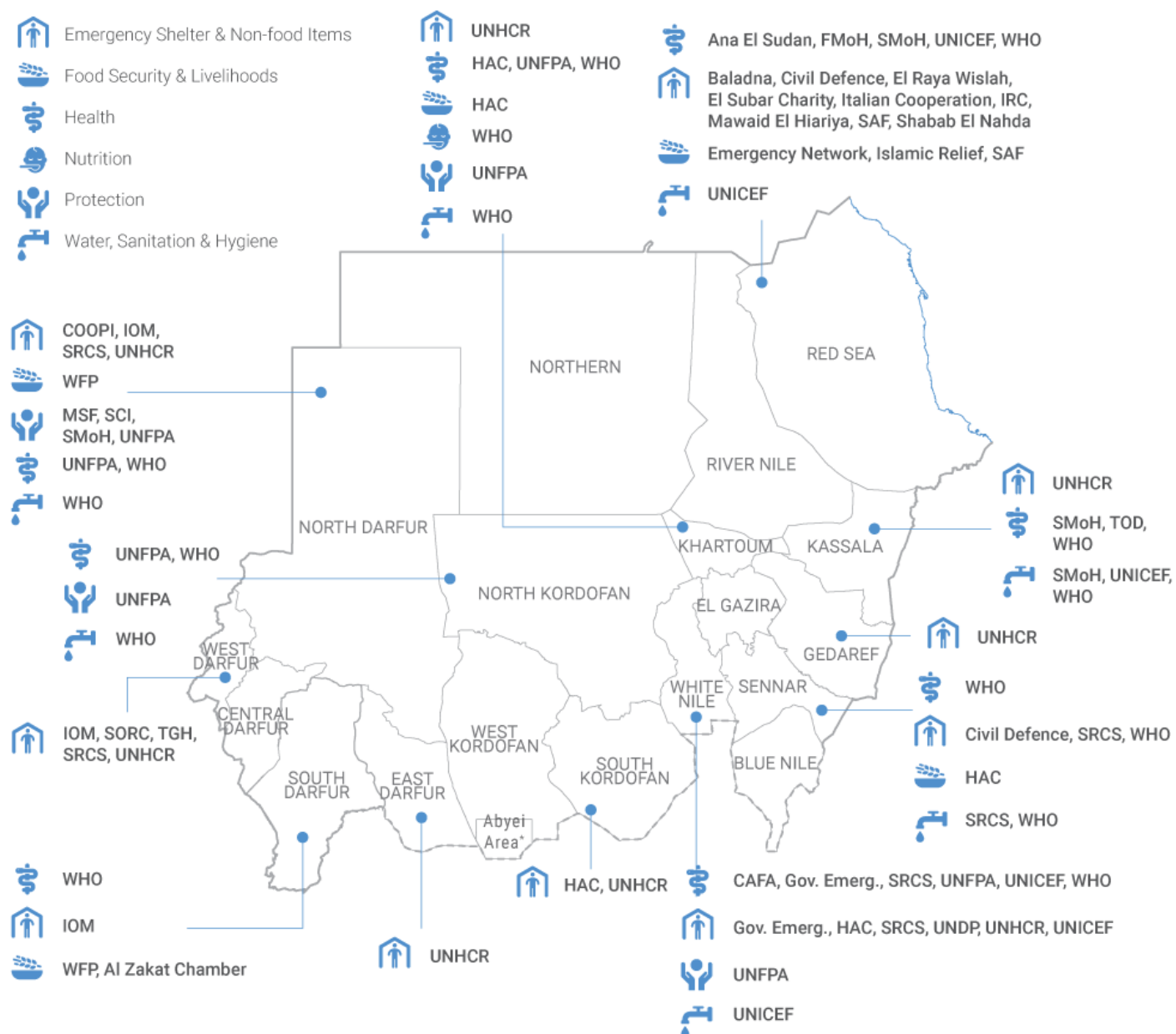
Number of AWD Suspected Cases in Blue Nile

In Blue Nile, four mobile cinema shows reaching 370 people were staged, five theatre shows reaching 1,420 people, and 16 health awareness messages were broadcast through radio. The total number of beneficiaries from radio messages represent 75 per cent of the state population (873,750). In addition, 22 public sessions were conducted reaching 465 people and informational materials were distributed to 51,135 people.

According to WHO, cholera remains a global threat to public health and an indicator of inequity and lack of social development. Researchers have estimated that every year, there are 1.3 to 4.0 million cases, and 21,000 to 143,000 deaths worldwide due to cholera. Cholera is an extremely virulent disease that can cause acute watery diarrhoea with severe dehydration. It takes between 12 hours and 5 days for a person to show symptoms after ingesting contaminated food or water. Cholera affects both children and adults and can kill within hours if untreated. Most people infected with *Vibrio cholerae* do not develop any symptoms, although the bacteria are present in their faeces for 1-10 days after infection and are shed back into the environment, potentially infecting other people. Cholera is often predictable, preventable and can ultimately be eliminated where access to clean water and sanitation facilities, and satisfactory hygiene conditions are ensured and sustained for the whole population.

VISUAL (12 days ago)

Map of Sectors Responding to Floods by State



* The final status of the Abyei Area is yet to be determined.

FEATURE (5 days ago)

Multi-Sector Rapid Floods Assessment Conducted in Khartoum (Mayo, Al Gailli and Al Salaama areas)

An estimated 32,060 people were affected—including eight deaths—by heavy rains and flash floods in Mayo, Omdurman and Ombada areas (Mayo, El Nasr, El Kaddisia and the "open area" refugee site Dar Es Salam) as well as the localities of Sharq el Nile (Umdow, Haj Youssif areas where two people died) Karrari and Khartoum North (Al Gaili, Wad Ramli areas). The inter-sector coordination group led by OCHA undertook a rapid assessment to three locations in Khartoum to get an overall understanding of the needs, response and gaps of the people affected by the floods. The teams visited Mayo, Al Gaili and Al Salaama areas and had had focus group discussions, key informant interviews and also visited schools, health and nutrition centres as well as some affected households.

Overall, all the areas visited are facing similar challenges, many of which are due to under development, poverty and these have now been exacerbated by the flood damage. Poor households who were barely making ends meet are now struggling to rebuild their lives with limited support.

Immediate Response

Shelter/NFIs: Distribution of shelter and non-food items to enable families start rebuilding their homes

WASH: Explore interventions to support hygiene and sanitation in all areas assessed. Water supply remains a challenge in El Salaama and Mayo areas therefore provision of water should be considered. In addition, construction of latrines is a priority.



Heavy rain and flood damage in Gaboush neighbourhood, Mayo area, Khartoum

Health: Emergency health services including supply of key medicines and other medical supplies to existing health facilities. As indicated, all the areas visited still have stagnant water which will be a source of vector breeding, as such vector control activities including spraying and fogging are essential.

Nutrition: In El Salaama, nutrition services have been suspended and are expected to re-open in September, however nutrition supplies including RUTF, RUSF which are normally provided by the Ministry of Health are urgently required. Further assessment of nutrition needs including MUAC screening is required in order to have a comprehensive picture of the needs and required response.

Food Assistance: Some households have received food assistance from volunteers and a few NGOs, but this has not been enough to meet the food needs. Further assessment to determine options of food assistance would be required; in the absence of this, short term food assistance could be considered as it would allow families to fill the gap as they try to rebuild their livelihoods.

Long term Response As indicated above, the areas are under developed which is compounding the impact of any shocks including floods. Several interventions including urban planning, environmental sanitation, rehabilitation of roads as well as other infrastructure remain a priority.

Read the full report here: <https://www.humanitarianresponse.info/en/operations/sudan/assessment/khartoum-rapid-assessment-29-august-2019>

FEATURE (5 days ago)

International Charter Space and Major Disasters activated for Sudan floods

According to UNOSAT's Preliminary satellite derived flood assessment in Khartoum, Red Sea, River Nile and White Nile in Sudan issued on 26 August, flooded areas and the extent of floods increased in the following locations in August (between 6 and 25 August): River Nile (Al Zeidab district), Khartoum State (Wad Ramli and Al Gaili districts), White Nile (Al Shawafa Al Kwahala 1 & 2 districts).

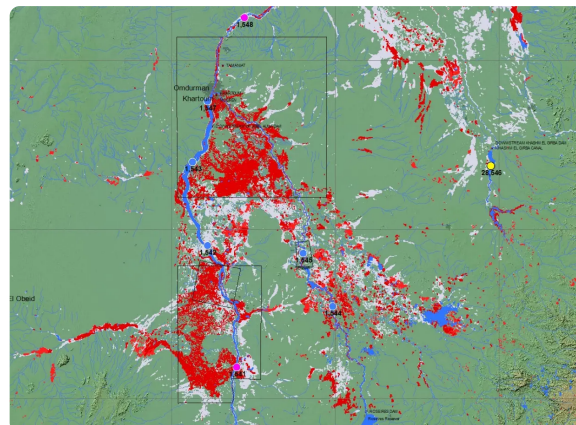
The International Charter Space and Major Disasters was activated for Sudan Floods on 26 August 2019. UNITAR/UNOSAT submitted the request for Charter activation on behalf of UNOCHA, UNICEF, and Sudan's Ministry of Agriculture and Forestry. Since 26 August, the Charter produced maps on floods in Sudan, including for Kassala,

Khartoum, River Nile, Sennar, and White Nile states.

All maps are available here:

<https://www.unitar.org/unosat/maps/SDN>

The Charter is a worldwide collaboration, through which satellite data are made available for the benefit of disaster management. By combining Earth observation assets from different space agencies, the Charter allows resources and expertise to be coordinated for rapid response to major disaster situations; thereby helping civil protection authorities and the international humanitarian community.



Satellite map of flood situation in Sudan

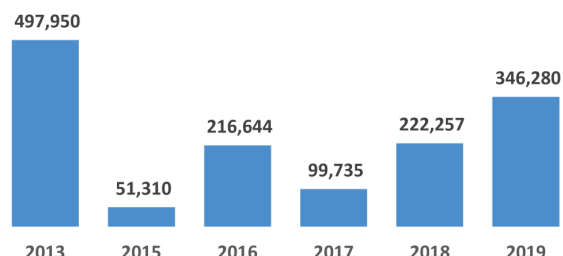
This unique initiative is able to mobilise agencies around the world and benefit from their know-how and their satellites through a single access point that operates 24 hours a day, 7 days a week and at no cost to the user.

The satellite data obtained by the Charter offers invaluable aid to the end-users -typically disaster relief organisations. Following a successful activation of the Charter, they may receive satellite data of affected areas within a matter of hours or days (depending on the type of the disaster and available satellite resources). The data is delivered on an ongoing basis throughout the duration of the Charter activation and provides valuable information about a disaster that is not possible to obtain on the ground.

EMERGENCY RESPONSE (5 days ago)

Floods Overview

As of 2 September 2019, an estimated 346,300 people have been affected by heavy rains and flash floods across 16 states and the Abyei area*, according to the government's Humanitarian Aid Commission (HAC) and partners, surpassing the 222,257 people affected in 2018.



HAC has reported 78 related deaths, mainly due to collapsed roofs and electrocution. In total 41,514 homes have been destroyed and 27,742 homes damaged.

States affected include Khartoum, Blue Nile, Gedaref, El Gezira, Kassala, North Darfur, North Kordofan, Northern, Red Sea, River Nile, Sennar, South Darfur, South Kordofan, West Darfur, West Kordofan, White Nile and the Abyei area. The majority of people affected require emergency shelter and non-food items (ES/NFIs), water, sanitation and hygiene (WASH) services, food, health, vector control and draining of stagnant water. Various government authorities and humanitarian partners are currently responding to needs. The risk of water-borne disease outbreaks is high—mainly due to the presence of stagnant water in many flood-affected areas—but humanitarian organizations are carrying out vector control activities to reduce risks.

The Flood Task Force, led by HAC, is coordinating and facilitating flood preparedness and response efforts. The Task Force has been working to identify response gaps and ensure they are addressed in a timely manner. The Task Force will remain active until the end of the rainy season. All information in this update has been provided by HAC and partners.

*The final status of the Abyei Area is yet to be determined.

EMERGENCY RESPONSE (5 days ago)**Emergency Shelter/Non-food Items (ES/NFIs) Sector Flood Response*****Sector Overview***

As of 03 September 2019, approximately 59,351 households or approximately 281,000 individuals have been affected by the floods across Sudan. Affected households include IDPs, refugees, and communities who are in need of shelter solutions and life-saving non-food items (NFIs) such as plastic sheeting, plastic mats, jerry cans, blankets and cooking sets. These items help restore a minimal sense of dignity and protection against exposure to the elements, mitigate health risks and provide some privacy and security to those in need.

Response

To date, the Sector has been able to response to the needs of some 20,078 households or 100,390 individuals (34% of those in need) through 10 Sector partners across 7 of 13 states with NFI needs. Through the NFI Core Pipeline managed by UNHCR, the Sector has responded to the needs of some 7,274 households or 36,370 individuals since the beginning of the flood season in July 2019.

Response per state is as follows: East Darfur 34 HH reached; Kassala 796 HH; Khartoum 16,349; North Darfur 1,924 HH reached; North Kordofan (accessible villages) 1,450 HH reached; Red Sea 1,697 HH; South Darfur 400 HH reached; and in White Nile state, 15,500 HH. Partners also reached affected households in Abyei and Agok.

HAC has provided emergency household supplies to 1,500 people in White Nile State. Civil Defense, in coordination with UNHCR, air-dropped 1,554 NFI kits to people in areas that are inaccessible due to flood waters and poor road conditions. In addition, civil defense has provided tents, plastic sheeting and empty sacks to households in Sennar and River Nile States.

In Kassala, UNHCR has dispatched NFI kits and plastic sheeting to support timely NFI response to affected households.

In Khartoum state, the Sudanese Armed Forces (SAF) distributed emergency household supplies in Al Gaili, Wad Ramli and Mayo areas. The international NGO Italian Cooperation distributed 500 plastic sheets in the Mayo area.

Gaps

The current gap for NFI needs stands at 66% of households affected across 13 states, with key gaps in White Nile and Khartoum states. NFI Core pipeline has allocated additional resources to meet the needs in Khartoum, White Nile, and Red Sea states. In addition to planned responses in the pipeline in West, North and East Darfur, and North Kordofan states.

The shelter gap remains high, as most affected households do not have access to emergency materials for temporary shelter couples or are residing in buildings such as school. Given the near end of the rainy season, shelter solutions for vulnerable IDPs, and host communities are a top priority intervention

ES/NFI supplies are also needed in the following states: Sennar, River Nile, Gedaref, Northern and El Gezira States.

In Khartoum State, there are outstanding gaps in shelter and NFI in Sharg Elnile, Jabal Awliya, Al Gaili and Wad Ramli.

In Red Sea and North Kordofan states, there are areas still inaccessible due to flood waters. In Red Sea, ES/NFI assistance for about 80 families is pending and in North Kordofan 12 villages are inaccessible and affected people need NFIs. Additionally, in the Abyei PCA box, some areas remain inaccessible due to flood waters and partners are looking into other options to deliver NFIs to the affected people.

In East Darfur, there are unconfirmed reports of flood-affected families in Muhajiriya in Yassin localities.

EMERGENCY RESPONSE (5 days ago)

Food Security and Livelihoods (FSL) Sector Flood Response

Overview

The World Food Programme (WFP) has pre-positioned and re-allocated food stocks to ensure rapid response to people affected by floods. Additional support from Qatar, Kuwait and Saudi Arabia is also planned

Response

In Khartoum State, the Sudanese Armed Forces (SAF) distributed food in Al Gaili, Wad Ramli and Mayo areas. National partners have also distributed food to people affected.

HAC has provided food and emergency household supplies to people in White Nile (1,500 people), Red Sea and Sennar (1,250 people) states.

In North Darfur State, WFP, in cooperation with the Sudanese Red Crescent Society (SRCS), provided one-month food and nutrition assistance and distributed food assistance to families affected in El Kuma and Tawilla localities reaching more than 9,000 individuals.

In South Darfur State, the Zakat chamber provided food assistance to those affected in Ed El Fursan locality, HAC provided 250 families with food security and livelihood assistance and WFP provided 2,000 individuals with one-month half food rations.

In El Gezira State, local authorities distributed food to those affected in Almanagil locality.

In Kassala, WFP has provided one-month food and nutrition assistance to 1,120 individuals.

In White Nile, WFP is planning to provide food and nutrition assistance up to 40,000 individuals

Gaps

More food assistance is needed in Khartoum state. In the Abyei PCA box some areas remain inaccessible due to flood waters and partners are looking into other options to deliver food to the affected people.

Restocking of seeds, tools and livestock is required in Kassala, White Nile, North Darfur, Red Sea, Kassala and Blue Nile states.

EMERGENCY RESPONSE (5 days ago)

Health Sector Flood Response

Sector Overview

The coordination of the country health response is coordinated by the Federal Ministry of Health (FMOH) Flood Response task force, co-chaired with the World Health Organization (WHO). The FMOH, with WHO support, has activated the daily Early Warning Alert and Response System (EWARS) in all health facilities in areas affected by floods.

Response

Throughout Sudan, WHO distributed 16 Rapid Response Kits - enough to cover the needs of 2 million people. In Khartoum State, WHO provided medicine and medical supplies to health facilities in areas affected to cover the health needs of 32,000 people for one month. WHO pre-positioned 5 surgical and trauma kits in 5 Hospitals in Khartoum. WHO also supported 11 mobile clinics in Khartoum and six in White Nile. The State Ministry of Health (SMoH) established six temporary clinics and the Doctors Committee established an additional six clinics with WHO providing all clinics with medicines and orientation on EWARS and reporting of imminent health threats.

WHO provided surgical supplies for 200 major interventions (including cesarean sections) to Al Bashair hospital to ensure affordable referral treatment for people affected by floods. WHO provided 10 IEHK, 5 RRs, Miscellaneous Items for more than 70 000 people. WHO supported activation of epidemic-prone diseases alert investigation and response in all affected states.

Community mobilization and an integrated vector control campaign were launched, with WHO providing operational costs, equipment, personal protection, 24 trucks, and training. The FMOH and SMoH provided chemicals and follow up. The campaign will benefit about 600,000 people. Vector control campaigns are ongoing in Suba and Elhela areas and will last until 3 December 2019.

Six days of medical and solid waste cleaning campaign were initiated by WHO, in collaboration with the national NGO NAFEEER and Resistance Committee, in major hospitals in Khartoum State including, Ibrahim Malik, Bashair, Bahri, Omdurman Pediatric, Alban Jadeed, and Al Turki.

UNICEF dispatched medical and emergency supplies that will cover the health needs of between 35,000 and 40,000 people affected by floods in the Jebel Awliya area.

UNFPA conducted a joint visit with Sudanese Red Crescent Society (SRCS) to Wad Ramli, El Jaili and Abu Tilaiha in Khartoum State where 1,350 dignity kits were distributed. The visit revealed a lack of sexual reproductive health services in temporary clinics in the affected areas. Midwives reported losing their midwifery kits while fleeing the flooded areas.

In Kassala State, SMoH distributed 730 long-lasting insecticide nets (LLIN), insecticides and 25 toilet slabs. WHO donated 5 Fogging machines, 10 water testing kits, 2 Hudson Pumps and 3 larva collection kits along with operational costs to initiate vector control and water quality testing in areas where the flood water was drained. WHO provided medical supplies to cover the health needs of 20,000 people for one month, and provided operational support for one temporary health clinic.

In South Darfur State, WHO provided one Interagency Emergency Health Kit (IEHK) which can serve up to 3,000 for 3 months. In addition, WHO provided health supplies to health facilities in the state and supported the operation costs for water quality monitoring. WHO/SMoH jointly provided health education for 600 people affected by floods in Nyala South.

In North Kordofan State, UNFPA supported SMoH to distribute 225 dignity kits in Gabrat Elshiekh, El Rehad, and Um Rawaba localities. Another 1,775 dignity kits will be distributed soon. In addition, UNFPA supported SMoH to distribute Emergency RH kit 12 (Blood transfusion kit) to El Obeid Hospital. This will allow the health staff to perform safe blood transfusion after testing for HIV, syphilis, hepatitis B and C.

In North Darfur, UNFPA supported the distribution of 45 dignity kits in Abu Shouk IDP camp, 40 dignity kits in Gary village in El Fasher, and 131 dignity kits in El Salam IDP camp. UNFPA also supported the distribution of 80 clean delivery kits to Saudi Hospital in El Fasher and 37 clean delivery kits to El Salam and Abu Shouk IDP camps.

In West Darfur State, dignity kits will be provided to the SMOH through a project funded by the Central Emergency Response Fund (CERF). The SMOH, WHO, UNICEF, UNHCR, IOM, TGH provided vector control interventions.

In East Darfur State, WHO provided medicine and medical supplies, enough for 3,000 people for one month, for refugee response.

In Sennar State, WHO committed to provide medical supplies, enough to support 12,000 people for one month. WHO will send additional staff to support flood response.

In Gedaref State, WHO supported the operational costs for community mobilization and integrated vector control and provided with 10 water testing kits, 5 fogging machines, 2 hudson pumps, and 10 larvae collection kits.

In White Nile, SMOH, with the support of UNFPA, distributed clean delivery kits targeting 600 pregnant women and distributed emergency reproductive health kits to health facilities in Um Ramata and Alsalam localities. These kits will enable health facilities to provide emergency obstetric care services to approximately 525 pregnant women. UNFPA supported CAFA (a local NGO) to establish mobile clinics providing Sexual and Reproductive Health and Gender Based Violence services in Alsalam and Aljabalain localities. To widen the scope of the services provided, UNFPA has partnered up with UNICEF, WHO and WFP to provide the remaining PHC services.

In Blue Nile State, health partners are carrying out vector control campaigns in El Roseires locality and the routine health activities are ongoing. UNICEF prepositioned one AWD, Periphery kit, Renewable and one AWD Periphery Drug kit at the SMOH in Blue Nile. This week UNICEF in coordination with WHO and MoH released following items for Blue Nile SMOH: 15 IMCI kit, 10 pack of Zinc 20mg tablets/PAC-100, and 10 cartons of ORS low osm. 20.5g/1L CAR/10x100. Kassala: After the finalization of inter-agency assessment for flood response in Kassala below gaps determined, by UNICEF field team and below required supplies have been released: although there are still new areas affected and plans for another assessment is underway.

In Red Sea State, WHO, FMOH and SMOH trained 40 doctors and nurses on medical case management.

Gaps

In Khartoum State, more medicine and medical supplies are needed. Support for affordable life-saving referral services for emergency cases in affected areas is also required.

In North Kordofan State, health facilities need emergency supplies. Stocks of clean delivery kits are available but more are needed.

In Blue Nile State, more support for vector control and water safety campaigns; water chlorination and community awareness is needed.

UNFPA reports a gap in the supply of dignity kits as there has been no pre-positioning of supplies due to lack of funding.

EMERGENCY RESPONSE (5 days ago)

Nutrition Sector Flood Response

Response

In White Nile State, there are health and nutrition response plans in place. UNICEF provided nutrition supplies. In the El Duimia locality, there is limited OTP/TSFP service ongoing with RUTF supplies provided by UNICEF.

In North Kordofan State, mid-upper arm circumference (MUAC) screening was carried out. In addition, infant and young child feeding (IYCF) programmes and a mobile outpatient therapeutic programme (OTP) have been established. Nutrition supplies have been pre-positioned will be distributed in areas that are accessible. In Jebrait El Sheik/Alandrara there are mass MUAC screening, IYCF activities and mobile OTP.

Beside financial support provide to partners (SMoH& NGOs) to run flood response related activities, including referral for malnourished cases, the following nutrition supplies were dispatched to the field to mitigate any increase in needs/enrollment of malnourished children: 5,200 cartons of RUTF were dispatched to East and South Darfur, Kasalla, Ghadref, West Kordofan, Blue Nile and Sennar states . 260 cartons of Therapeutic Milk (F100 & F75) and 30 MUAC tapes packs were delivered to Central and North Darfur states.

In El Kuma, North Darfur, WFP is providing emergency blanket feeding for 1,300 children aged 6-59 months and 300 PLW. In Tawilla there is a mass MUAC screening, OTP services with prepositioned supplies of RUTF and infant and young child (IYCF) activities.

Gaps

In Kassala State, mass MUAC screening needs to be carried out with ready-to-use therapeutic food and ready-to-use supplementary food interventions in the 22 villages in Naher Atbara, Rural Kassala, and Halfa El Gadida localities, that have been affected.

In White Nile State, WFP is re-allocating stocks for nutrition assistance.

EMERGENCY RESPONSE (4 days ago)

Protection Sector Flood Response

Sector Overview

UNFPA is planning to target the following flood affected states: Khartoum, South, North, West and East Darfur, Kassala, Gadaref, White Nile and North Kordofan. The response will focus on providing live-saving SRH services (Emergency RH kits and dignity kits will be distributed). In addition to basic and comprehensive emergency obstetric and neonatal care, this includes provision of clinical management of rape and referral services for survivors of sexual violence, family planning, STI management.

State	Women & Girls of Reproductive Health Age (Need of Dignity Kits)	Dignity Kits	Gap in Dignity Kits	Estimated number of cases of sexual violence who will seek care	Kit 3 Needed
North Darfur	2,779	216	2,563	56	1
West Darfur	1,400	-	1,400	28	1
South Darfur	1,848	-	1,848	37	1
Abyei PCA	3,581	-	3,581	72	2
N. Kordofan	5,130	225	4,905	103	2
White Nile	15,956	27	15,929	319	6
Sennar	5,243	-	5,243	105	2
Gedaref	3,564	-	3,564	71	2
El Gezira	2,748	-	2,748	55	1
Kassala	5,396	-	5,396	108	2
Red Sea	2,476	-	2,476	50	1
River Nile	906	-	906	18	1
Khartoum	7,694	1,350	6,344	154	3
Northern	240	-	240	5	1
Total	58,962	-	58,962	1,179	

Calculations based on the MISP calculator

There remains a large gap in the supply of dignity kits due to funding limitations. This has resulted in the inability to preposition and delays response which has a negative impact on women and girls. The distribution of dignity kits are also an important element to raise awareness and promote in-depth discussions on Gender-based violence risks with affected people.

Additional areas of concern include protection risks due to lack of privacy and overcrowding of displaced people. Existing gaps in other sectors such as the lack of functioning WASH facilities, lack of shelter materials and unsafe access to services pose a risk especially to women and girls. There is also a noted lack of awareness on GBV risks

and services.

Response

In Khartoum, UNFPA has conducted a joint visit with Sudanese Red Crescent to the following floods affected areas in Khartoum: Wad Ramli, Aljaili and Abu Tilaiha. 1350 dignity kits were distributed.

In White Nile, UNFPA supported CAFA (a local NGO) to establish mobile clinics providing SRH and GBV services in Alsalam locality. In addition, 27 women of reproductive age received dignity kits.

In North Kordofan, UNFPA supported SMOH to distribute 225 dignity kits to Gabrat elshiekh, Elrahad, and Um Rawaba localities. Another 1775 dignity kits are planned for distribution.

In North Darfur, UNFPA supported the distribution of 45 dignity kits in Abu Shouk Camp, 40 dignity kits in Gary village in Al Fasher and 131 dignity kits in Al Salam camp

Gaps

Major gaps include dignity kits for affected women and girls of reproductive health age and mapping of GBV services in the affected localities in order to establish referral mechanisms.

EMERGENCY RESPONSE (5 days ago)

Water, Sanitation and Hygiene (WASH) Sector Flood Response

Sector Overview

In Khartoum State UNHCR with Sudan's Commission for Refugees (COR) completed rainy season preparedness in July and early August for over 15,000 South Sudanese refugees and host community households in "open area" sites in Umbadda, Sharq El Nile and Jebel Awliya localities.

In White Nile State, UNDP has made tractors and trailers available which can be used to move people to higher ground.

Response

In Khartoum State, national partners are carrying out environmental health activities. To support integrated vector control activities and access to safe water, WHO provided fogging machines, water reservoirs, water quality testing kits, water filters and personal protective equipment to cover all affected areas. To support integrated vector control activities and access to safe water, UNICEF provided five water reservoirs. WHO supported with 25 water testing kits, 10 fogging machines, two hudson pumps, 100 personal protective equipment, three larvae collection kits and 2,000 water filters to initiate water quality and vector control interventions.

2,896,200 SDG was released to both FMOH and SMOH in Khartoum for: Construction of 300 emergency latrines Disinfection and cleaning of latrines (labor cost) Chlorination including supervision and monitoring. Rent of 5 vehicles 75 cartons of 33mg chlorine tablets 25 cartons of 1.67g chlorine tablets In Kassala State, UNICEF dispatched water, sanitation and hygiene (WASH) supplies and mosquito nets. WHO provided 10 water testing kits, five fogging machines, two hudson pumps, and three larvae collection kits to initiate water quality and vector control interventions.

In North Darfur, WASH supplies and slabs for latrines were distributed to all affected families. In Tawilla, 38 out of the required 600 latrines have been built so far. Vector control activities are ongoing. The government's Water and Environmental Sanitation Department (WES) trucked in water for the first five days of flooding, after which UNICEF

took over for two weeks. The international NGO COOPI provided a generator and water pump for one of the damaged boreholes. WHO provided 10 water testing kits, one fogging machine, two hudson pumps and three Larvae collection kits to initiate water quality and vector control interventions.

In South Darfur State, latrine disinfection has been carried out. Water quality control is being carried out by UNICEF, WHO, WES, and the Ministry of Health. WHO provided WASH assistance including water supplies for water quality management (water filters etc) and vector control supplies (fogging and spraying machines, and personal protection equipment). WHO supported with operational support and provided 10 water testing Kits, one fogging machine, two hudson pumps and three larvae collection kits to initiate water quality and vector control interventions.

In Sennar State, local authorities rehabilitated drainage systems and opened blocked drains. The Sudanese Red Crescent Society (SRCS) provided empty sacks and water pumps to drain stagnant water. WHO provided WASH assistance including water supplies for water quality management (water filters etc) and vector control supplies (fogging and spraying machines, and personal protection equipment).

In North Kordofan State, WHO provided WASH assistance including water supplies for water quality management (water filters etc) and vector control supplies (fogging and spraying machines, and personal protection equipment).

In El Gezira , Red Sea and River Nile states, WASH supplies were distributed and WHO provided vector control equipment (fogging and spraying machines, personal protection equipment), water testing kits, fogging machines, hudson pumps and larvae collection kits. In addition, draining of stagnant water is ongoing in River Nile State.

In White Nile, UNICEF provided 100 cartons of 33mg chlorine tablets, 2,150 water jerry cans and 50 cartons of soap (180 pcs each).

UNICEF's Communication for Development Section in partnership with the SMOH/ Health Promotion Unit organized a training for 200 youth volunteers from Khartoum state on flood response, who are responding to floods. The volunteers are from three localities in Khartoum state (Jabal Awlia, East Nile and Khartoum North). Those volunteers are part of the community initiatives of Nafeer, Thorat Khartif (Rainy Season Revolution), Community Resistance Groups, Health Promotion Volunteers Network and Youth Forum to support people affected by heavy rains and floods in Khartoum state. They are divided into six groups and are linked with Health Promotion offices in each locality. They receive interactive training to enhance their knowledge on water-borne diseases and prevention methods; interpersonal communication skill and using social media in social mobilization. The trained volunteers will conduct behavior change activities in the affected area for 15 days spread over one month.

Gaps

In Khartoum State, WASH services including waste collection and draining of stagnant water is needed.

In Kassala State, the water station in Aroma locality needs to be repaired and vector control activities need to be started as soon as the area becomes accessible. Areas which are currently inaccessible due to flood waters will need WASH and vector control assistance and damaged latrines will need repairing.

In White Nile, Red Sea, North Darfur, El Gezira, River Nile, West Darfur, Gedaref and Northern states, more WASH services are needed. In addition, vector control activities are needed in White Nile and Red Sea states.

EMERGENCY RESPONSE (5 days ago)

Refugee Flood Response

In Khartoum, flooding in Jebel Aulia locality has affected 250 refugee households in Dar Es Salaam Block 7 "Open Area" and over 400 households in Bantiu "Open Area", based on a recent rapid needs assessment conducted by COR. At least 426 latrines have been destroyed in Bantiu. Roads to Bantiu and the Dar Es Salaam "Open Area" sites are blocked and require sand and repair support to ensure sustained access to refugee households there. Water drainage ditches in Dar Es Salaam Block 7 have collapsed and needs repair. Vector control is urgently needed to mitigate disease outbreaks and risks associated with standing water.

In White Nile, refugee camps on the western bank of the White Nile River in Al Salam locality have been inaccessible for the last week due to washed out roads from recent floods. However, UNHCR and COR teams were able to reach Al Redis I and II, Jouri and Al Kashafa camps on 26 August for a rapid assessment of damages.

The assessments confirmed the following damages to camp infrastructure: to classrooms, distribution waiting areas, police station, clinic waiting areas in Al Redis I; distribution waiting areas and child friendly spaces in Al Redis II; and damages to clinic waiting areas, police station, classrooms and medicines warehouse in Jouri camp. Over 900 refugee households in camps and an estimated 900 host community households have had their shelters completely collapse or partially damaged and are in urgent need of shelter assistance and rehabilitation support.

UNHCR, Plan, ADRA and CAFOD, Qatar Foundation are supporting on NFI assistance for affected households across the State. NFI distribution in El Salam locality, including to affected refugee camps and hosting areas began this week.

An inter-agency needs assessment indicates a number of affected refugee households in Mayo and Salama neighbourhoods in Sharq El Nile locality, with urgent shelter, NFI, WASH, nutrition and health needs.

UNHCR and COR completed an NFI distributions in the 'Open Areas' refugee sites in Sharq El Nile, Umbadda and Jebel Aulia localities in July/early August, as part of rainy season preparedness, including host communities, ahead of the rains.

In East Darfur, both Kario and Al Nimir refugee camps have been affected, with damage to registration and reception centres reported. About 50 refugee households in Kario have been affected. Heavy rains on 22 August damaged the shelters of nearly 200 refugee households in Al Nimir, and the road to the camp is completely washed away. The road to Kario is also very badly damaged. HAC and WHO are assessing affected localities and host communities in the state.

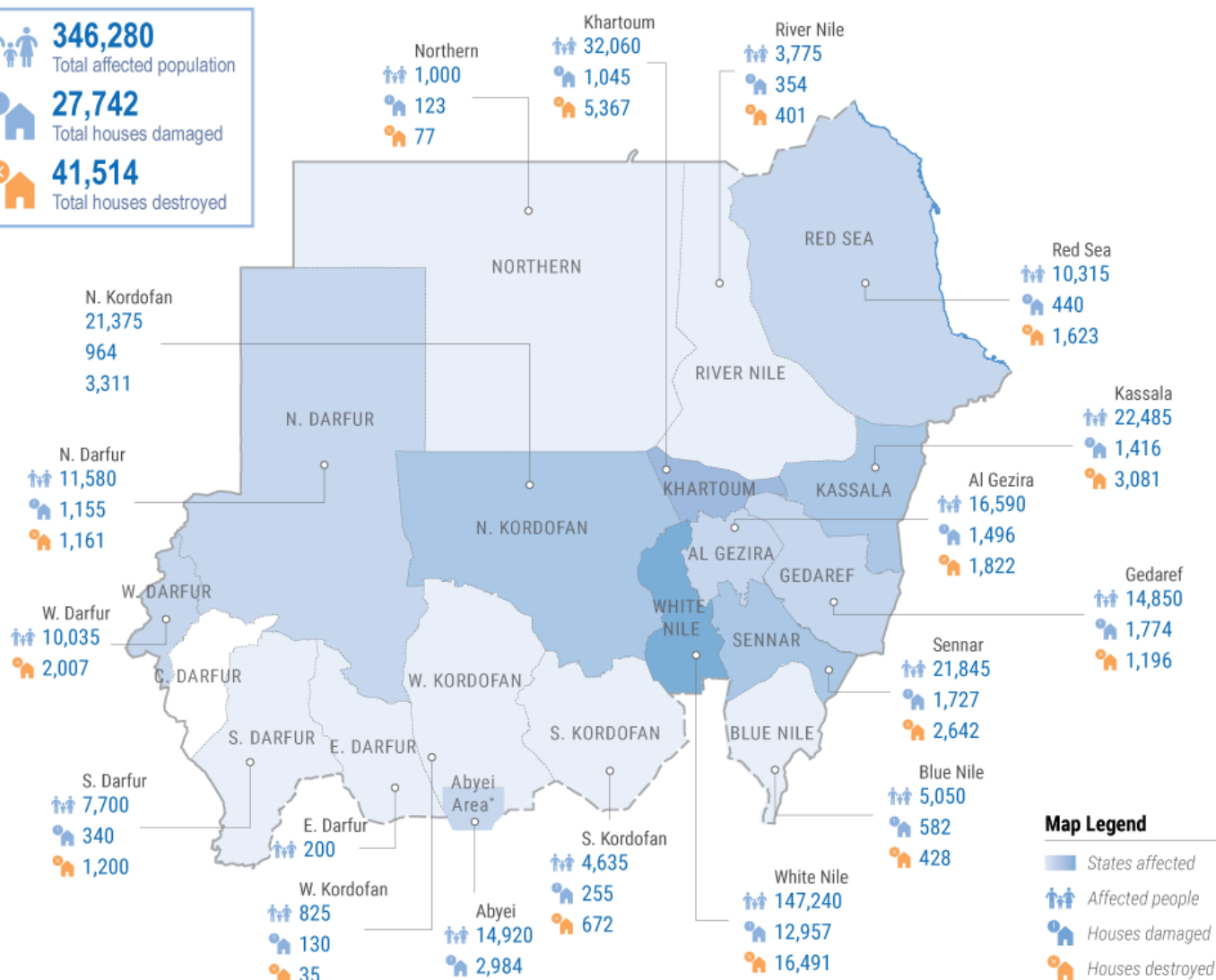
Preparedness in both camps was completed before the rain season, blanket distribution of plastic sheets, in addition to cleaning of drainage and haffirs in both camps. Extensive flood prevention digging and maintenance had been completed in 2018 for Kario and El Ferdous settlements, as both sites are very flood prone.

RESPONSE

UNHCR will support affected refugee households in refugee locations as needed. UNHCR will also provide NFI assistance to host community households based on assessed needs. All needed repairs to camp infrastructure in White Nile and East Darfur States will also be completed. UNHCR is also support on nutrition, NFI and WASH response for refugee and host communities in Khartoum State.

VISUAL (5 days ago)

MAP: Floods across Sudan (As of 2 September 2019)



* The final status of the Abyei Area is yet to be determined.

Source: HAC and partners

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