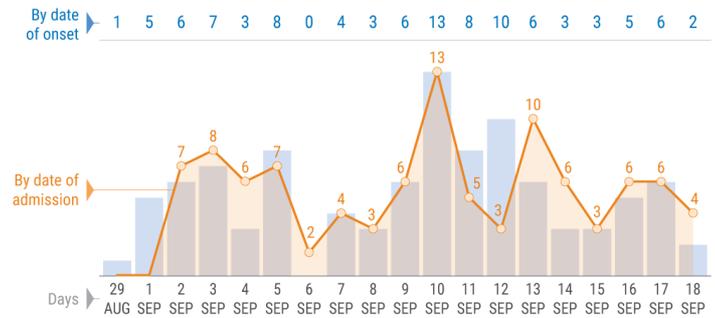


HIGHLIGHTS (1 hour ago)

- As of 18th September 2019, five out of seven localities in Blue Nile state reported 99 suspected cholera cases, with six deaths reported.
- According to the Ministry of Health, the states that have the highest risks of cholera outbreak are: White Nile, Gedaref, Sennar, Kassala and Khartoum states.
- Humanitarian partners have provided approximately 146,000 people with improved access to safe water and sanitation in Blue Nile.
- The Sudan Humanitarian Fund (SHF) is allocating \$7.6 million for the cholera and flood response under its Reserve for Emergencies envelope.

Number of AWD suspected cases by date of onset and date of admission, Blue Nile as of 18 September 2019



KEY FIGURES

364,200 Total affected population

17 States affected (reported HAC & Partners)

45,104 Homes destroyed

27,742 Homes damaged

FUNDING (2019)

\$1.1B Required

\$377.9M Received

33% Progress

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

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EMERGENCY RESPONSE (1 hour ago)

Response and Funding to Mitigate Cholera Outbreak in Blue Nile

Sudan's Federal Ministry of Health (FMoH) confirmed four cases of cholera in Blue Nile State. There are a total of 99 suspected cholera cases, with six deaths reported as of 18 September. The current case fatality rate (CFR) in the state is 6.1 percent. With proper treatment, the case fatality rate for cholera should remain below 1 per cent.

The immediate actions taken by FMoH and health sector partners indicate that the current outbreak in Blue Nile State can be classified as an early detection and response scenario. In this scenario, there is a much better opportunity to prevent new cholera cases, avert deaths and save time and resources spent on overall response, if the response is sustained and there is immediate funding for it.

Currently, resource mobilization for cholera response in Blue Nile State and preparedness in high risk states is a major challenge. The SHF is allocating \$7.6 million under its Reserve for Emergencies envelope across all sectors.

AWD and cholera response

The FMoH and WHO are working together to strengthen disease surveillance, provide medical treatment for patients, distribute laboratory supplies, monitor water quality and chlorinate public water supplies, and promote health education and hygiene among affected as well as at-risk communities. Two cholera treatment centres are serving patients in Blue Nile, and a dedicated isolation centre has been established for cholera case management.

FMoH, WHO and UNICEF have already provided acute watery diarrhoea (AWD) kits—enough to treat 300 people—with three additional kits in the pipeline. In addition, IV fluids (Ringer lactate) and oral rehydration therapy supplies have already been provided for treatment of the patients. UNICEF is supporting eight Oral rehydration therapy points (ORT), to ensure the timely access of affected people to lifesaving rehydration. The timely clearance and movement of supplies will be critical to an effective response.

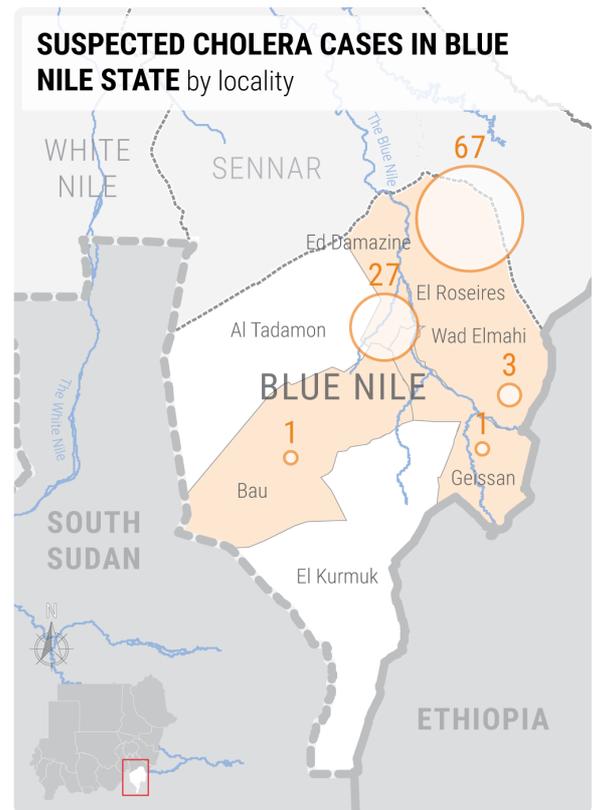
The State Ministry of Health (SMoH) in Blue Nile in partnership with UNICEF is supporting water chlorination activities and hygiene awareness in AWD-affected areas of Blue Nile at household levels. Additional rapid response activities include house-to-house visits by nearly 700 community mobilisers, providing families with information about how to protect themselves by cleaning and storing drinking water safely, good hygiene and hand washing practices, keeping food safe, and on how to handle a sick family member.

Water chlorination activities are underway at eight water sources connected to the urban water network in both Ed Damazine and El 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 and 5,200 jerrycans at water sources. New water sources have been installed to provide better water service to people in affected areas, with over 146,000 people now having improved access to safe water and sanitation in Blue Nile alone. To monitor and contain the outbreak, WHO has surged a team of public health experts to Blue Nile State; other international experts will soon follow.

Community Engagement and Prevention

Efforts to implement a communication strategy at the national level and in Blue Nile 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. UNICEF’s Communication for Development C4D Section is training 1,400 volunteers in seven states. The training is focusing on the integrated strategy for water related diseases and long-term impact on behavioural change.

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.



WHO commends the new Government of Sudan with regard to transparency and full implementation of the international health security measures and protocols—a critical step to containing the disease.

EMERGENCY RESPONSE (4 hours ago)

Floods Overview

The flood response in Sudan is being coordinated by the Flood Task Force (FTF) Steering Committee which is led by the Sudanese Government’s Humanitarian Aid Commission (HAC). Overall response is going well in areas where humanitarian organizations have operations and where preparedness plans were undertaken, mainly in Darfur states and in South Kordofan. Government access and administrative procedures were facilitated by HAC with no major challenges faced. Assessments were carried out to identify people in need of assistance in flood-affected areas in Darfur states, Kassala, White Nile, Sennar and for the first time in Khartoum State. As of 19 September 2019, an estimated 364,200 people have been affected by heavy rains and flash floods across 17 states and the Abyei area*, according to HAC and partners. HAC has reported 78 related deaths, mainly due to collapsed roofs and electrocution. In total 45,104 homes have been destroyed and 27,742 homes damaged.

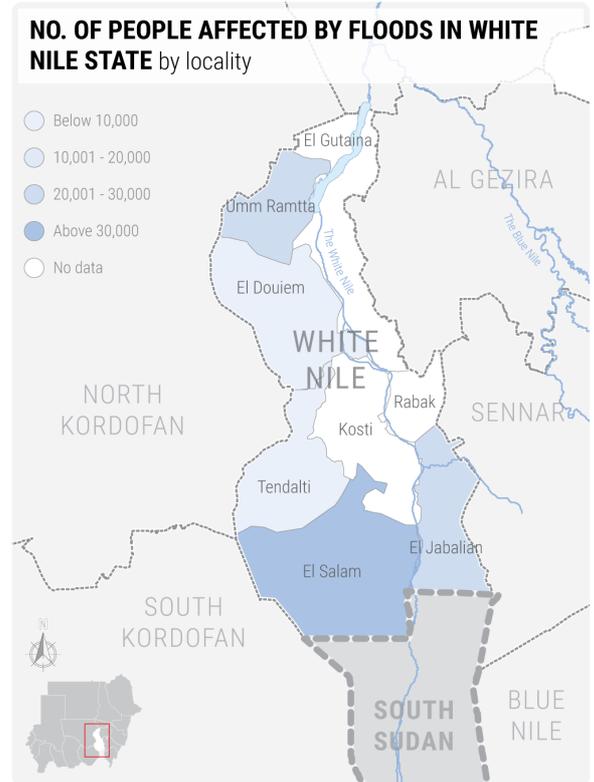
In Khartoum, the inter-sector coordination group (ISCG) is meeting on a weekly basis to coordinate humanitarian actors around key needs, response and gaps. The ISCG will now add response to the acute watery diarrhoea (AWD)/cholera outbreak to the agenda. At the state level, OCHA is working with state-level HACs’ to coordinate the identification of key needs, response and gaps. In areas where OCHA is not present, agencies were identified as focal points to lead coordination efforts. Due to the scale of needs in White Nile State, OCHA has deployed a team to the state to coordinate response.

The total number of people affected by floods and in need of assistance is slowly increasing as more areas become accessible—as water dries up—mainly in El Salam and Tandalti localities in White Nile State. In areas where humanitarian actors are not present, HAC and national actors are trying to meet needs, but response is hampered by limited relief supplies, funding or staff. The main need of all people affected by floods are emergency shelter and household supplies (ES/NFIs). According to the Financial Tracking Service (FTS), the ES/NFI sector in the 2019 Humanitarian Response Plan (HRP) is only 0.3 per cent funded as of 12 September 2019. Other assistance needs include food, water, sanitation and hygiene (WASH), and health services.

Outstanding gaps

Despite all ongoing response efforts by government authorities, UN agencies, international NGOs, national NGO and regional countries, not all people have received the assistance they need. In White Nile, Sennar, Khartoum, and Gedaref states an estimated 36,000 people still need water, sanitation and hygiene assistance. In White Nile, Sennar, and El Gezira states, 107,000 people still need health assistance. In White Nile, Khartoum, Sennar, and Kassala states, about 45,000 people still need ES/NFIs. There has been limited education assistance provided.

Forecast





According to the latest Sudan Meteorological Association (SMA) forecast, less rainfall is expected as the rainy season comes to an end across the country. However, slightly above normal rainfall is expected in Blue Nile, South Kordofan and southern parts of the Darfur area. The risk of water-borne disease outbreaks such as AWD/cholera remains high and additional needs may arise in the coming months. Vector control activities need to be strengthened in all states to mitigate this risk.

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

EMERGENCY RESPONSE (23 hours ago)

Emergency Shelter/Non-food Items (ES/NFIs) Sector Flood Response

Sector Overview

As of 3 September 2019, an estimated 346,300 people have been affected by heavy rains and flash floods across Sudan. Affected households mostly in need of emergency shelter and non-food items (ES/NFIs), such as plastic sheeting, plastic mats, jerry cans, blankets and cooking sets. These items will 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.

In Khartoum, UNHCR and the Commission for Refugees (COR) had carried out rainy season preparedness activities between 23 June and 7 August in nine 'open area' settlements in Jebel Aulia, Sharq El Nile, and Umbadda localities, delivering NFI kits to over 13,405 South Sudanese refugee families (around 67,000 people). An additional 2,142 vulnerable host community families (about 10,700) also received NFI kits provided by UNICEF.

Response

To date, the Sector has been able to respond to the needs of some 38,150 families (about 191,000 people) through 10 Sector partners and international assistance.

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

In White Nile, HAC provided emergency household supplies to 1,500 people. Civil Defense, in coordination with UNHCR, air-dropped 1,554 emergency household supply kits to people in areas inaccessible due to floodwaters and poor road conditions. The international NGO Islamic Relief Worldwide (IRW) distributed emergency household supplies (blankets, mosquito nets, jerry cans, sleeping mats, plastic sheeting, soap, women's sanitation supplies, and water purification tablets) to people affected in Shabasha and Elwihda areas (Ed Douiem locality) and in Guli area (Kosti locality).

In Sennar and River Nile, Civil Defense provided tents, plastic sheeting and empty sacks to affected households.

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

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

In South Kordofan, a truck from the Sudanese Armed Forces (SAF) will transport emergency household supplies from Abassiya to Abu Kershola locality, with WHO providing fuel and operational costs.

Shelter gap remains high, as most affected households do not have access to emergency materials for temporary shelter. Some families have taken refuge in buildings such as schools. Given the near end of the rainy season, shelter interventions for vulnerable IDPs, and host communities are a top priority intervention

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

In Khartoum, there are outstanding gaps in shelter and NFI supplies in Sharg El Nile, Jebel Auliya, Al Gaili and Wad Ramli.

In Red Sea and North Kordofan, there are areas still inaccessible due to flood waters. In Red Sea, ES/NFI assistance for 80 families is pending and in North Kordofan 12 villages are inaccessible and affected people need NFIs.

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 (23 hours 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 was also provided.

Response

In Khartoum State, the Sudanese Armed Forces (SAF) distributed food in Al Gaili, Wad Ramli and Mayo areas, in addition to the food distributed by national partners.

HAC provided food to 1,500 people in White Nile and 1,250 people in Red Sea and Sennar states.

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

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

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

In Kassala, WFP provided one-month food and nutrition assistance to 1,120 people in the state.

Gaps



More food assistance is needed in Khartoum state. In the Abyei PCA box, some areas remain inaccessible due to floodwaters 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 (3 hours ago)

Health Sector Flood Response

Sector Overview

The coordination of flood health response is carried out by the Federal Ministry of Health (FMoH) Flood Response task force, which is co-chaired by 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.

WHO supported the activation of epidemic-prone diseases alert investigation and response in all affected states. Community mobilization and integrated vector control campaigns were launched, with WHO providing operational costs, equipment, personal protection, transportation, and training. The FMoH provided chemicals and follow up on response activities. Health activities will benefit about 600,000 people.

Sexual and Reproductive Health (SRH) assistance is required in all affected states. Out of the total population affected by floods it is estimated that 83,100 are women of reproductive age, of whom about 8,300 are currently pregnant. Emergency reproductive health kits, including clean delivery kits, are needed across all affected states to ensure safe deliveries, the provision of emergency obstetric care services, as well as other lifesaving sexual reproductive health services.

In South Kordofan, the health situation in areas affected by floods is stable with no reports of any related disease outbreaks. WHO and health partners have sufficient relief supplies available and have the capacity to support operational costs.

Response

Throughout the country, WHO distributed 16 Rapid Response Kits (RRK), enough to cover the needs of up to 2 million people.

In Khartoum, WHO provided medicine and medical supplies to health facilities in affected areas to cover the health needs of up to 32,000 people for one month. WHO pre-positioned five surgical and trauma kits in five hospitals in Khartoum and supported 11 mobile clinics in Khartoum and six in White Nile states.

The State Ministry of Health (SMoH) and the Doctors Committee in Khartoum have established six clinics each, with supplies of medicines, orientations on EWARS, and reporting of imminent health threats provided by WHO. WHO also provided surgical supplies for 200 major interventions (including cesarean sections) to Al Bashair hospital to ensure affordable referral treatment for people affected by floods; 10 Inter-agency Emergency Health Kits (IEHK), five RRKs, and miscellaneous supplies to cover the needs of more than 70,000 people in Khartoum State.

Vector control campaigns are ongoing in Suba and Elhela areas of Khartoum State and will last until 3 December 2019. Six days of medical and solid waste cleaning campaigns were initiated by WHO—in collaboration with the national NGO NAFEER and Resistance Committee—in major hospitals in Khartoum 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 in the Jebel Aulya area. UNFPA carried out a joint visit with the Sudanese Red Crescent Society (SRCS) to Wad Ramli, El Gaili and Abu Tilaiha in Khartoum State where 1,350 dignity kits were distributed. UNFPA also transported volunteer doctors and medicines to emergency clinics located in flood-affected areas in the state. These doctors will also provide SRH and other health services to pregnant women in these areas.

In Kassala, SMOH distributed 730 long-lasting insecticide nets (LLIN), insecticides and 25 toilet slabs. WHO donated five fogging machines, 10 water testing kits, two hudson pumps and three larva collection kits along with operational costs to initiate vector control and water quality testing in areas where floodwaters were drained. WHO provided medical supplies to cover the health needs of up to 20,000 people for one month and provided operational support for one temporary health clinic.

In South Darfur, WHO provided one 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 operational costs for water quality monitoring. WHO and SMOH jointly provided health education for 600 people affected by floods in Nyala South.

In North Kordofan, UNFPA supported the SMOH to distribute dignity kits in Jebrat El Shiekh, Um Rawaba and El Rehad localities. In addition, UNFPA supported SMOH to provide an Emergency RH kit and 12 blood transfusion kits 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 South Kordofan, three RRKs have been pre-positioned in Talodi locality. Each kit has essential drugs and medical supplies that can cover the health needs of up to 10,000 people for one month. Al Abassiya, Rashad and Abu Kershola localities have all received one RRK each. UNICEF is partnering with SMOH to provide one integrated management of childhood illness (IMCI) kit—which can cover the health needs of up to 3,000 children under five years—in each of the four affected localities.

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 in El Salam and Abu Shouk IDP camps.

In West Darfur, the SMOH, WHO, UNICEF, UNHCR, IOM, and the international NGO Triangle Génération Humanitaire (TGH) provided vector control interventions.

In East Darfur, WHO provided medicines and medical supplies for refugee response, that are enough to cover the health needs of up to 3,000 people for one month.

In Sennar, WHO provided medical supplies to support up to 12,000 people for one month.

In Gedaref, WHO supported community mobilization and integrated vector control activities with operational costs, and provided 10 water testing kits, five fogging machines, two hudson pumps, and 10 larvae collection kits.

In White Nile, the SMOH, with the support of UNFPA, distributed clean delivery kits to pregnant women and distributed emergency reproductive health kits to health facilities in Um Ramtta, El Salam and El Jabalian localities. These kits contain surgical supplies for basic emergency obstetric care for pregnant mothers. Clean delivery kits were also given to 10 midwives in Um Ramtta and El Salam localities and in Alshegaig Hospital. UNFPA supported the national NGO CAFA to provide SRH and gender-based violence services in mobile clinics in El Salam and El Jabalian localities. In Um Ramtta locality, UNFPA supported five rounds of mobile clinics where ante-natal care services were provided to 160 pregnant women and family planning services were provided to 121 women. In addition, clean delivery kits were distributed to 36 visibly pregnant women to ensure safe and clean deliveries. WHO supported six mobile clinics in the state.



In Blue Nile, health partners are carrying out vector control campaigns in El Roseires locality and routine health activities are ongoing. UNICEF pre-positioned one Acute Watery Diarrhoea (AWD), Periphery kit Renewable and one AWD Periphery Drug kit at the SMoH in Blue Nile. In addition, UNICEF - in coordination with WHO and FMoH - released 15 IMCI kits, 10 packs of Zinc tablets, and 10 cartons of oral re-hydration salts (ORS) to the SMoH in Blue Nile. In addition, UNFPA distributed clean delivery kits to three pregnant women admitted to cholera treatment centres in the state. In Red Sea, WHO, FMoH and SMoH trained 40 doctors and nurses on medical case management.

Gaps

Emergency reproductive health kits, including clean delivery kits, are needed across all affected states to ensure safe deliveries, the provision of emergency obstetric care, and other life-saving SRH services. UNFPA also reports a gap in the supply of dignity kits and there has been no pre-positioning of supplies due to lack of funding.

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

In Blue Nile, 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. There has been no pre-positioning of supplies due to lack of funding.

EMERGENCY RESPONSE (23 hours ago)**Nutrition Sector Flood Response****Response**

Beside financial support provide to partners - the SMoH and NGOs - to run flood response related activities, including referral for malnourished cases, the health sector provided nutrition supplies that were dispatched to mitigate any increase in needs or enrollment of malnourished children. Supplies include 5,200 cartons of RUTF to East Darfur, South Darfur, Kassala, Gedaref, West Kordofan, Blue Nile and Sennar states . In addition, 260 cartons of Therapeutic Milk and 30 packs of MUAC tapes were delivered to Central and North Darfur states.

In White Nile, nutrition and health response plans are in place. UNICEF provided nutrition supplies. In Ed Duwaym locality, limited outpatient therapeutic programme (OTP) and Target Supplementary Feeding Programmes (TSFP) services are ongoing with ready-to-use therapeutic food (RUTF) supplies provided by UNICEF.

In North Kordofan, mid-upper arm circumference (MUAC) screening was carried out and infant and young child feeding (IYCF) programmes and a mobile OTP were established. Nutrition supplies have been pre-positioned and will be distributed in areas that are accessible.

In North Darfur, WFP is providing emergency blanket feeding for 1,300 children aged between six and 59 months and 300 pregnant and nursing women in El Kuma locality. In Tawilla locality, a mass MUAC screening as well as OTP and IYCF services were carried out.

Gaps

In Kassala, mass MUAC screening needs to be carried out with RUTF and ready-to-use supplementary food (RUSF) interventions in the 22 villages affected in Atbara River, Rural Kassala, and New Halfa (Halfa Algadeeda) localities.

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

EMERGENCY RESPONSE (23 hours ago)

Protection Sector Flood Response

Sector Overview

UNFPA is planning to target Khartoum, South Darfur, North Darfur, West Darfur, East Darfur, Kassala, Gedaref, White Nile and North Kordofan states. Response will focus on providing life-saving sexual reproductive health (SRH) services. In addition to basic and comprehensive emergency obstetric and neonatal care, this includes providing clinical management of rape and referral services for survivors of sexual violence, family planning, and sexually transmitted infections (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 is a large gap in the supply of dignity kits due to lack of funds.

This has resulted in the inability to pre-position supplies causing delays response, and having a negative impact on women and girls. The distribution of dignity kits is an important element to raise awareness and promote in-depth discussions on gender-based violence risks.

There are also protection concerns due to the lack of privacy and overcrowding. Gaps in other sectors such as the lack of functioning water, sanitation and hygiene (WASH) facilities, lack of shelter materials and unsafe access to services pose a risk to women and girls. There is also a noted lack of awareness on gender-based violence risks and services.

Response

In Khartoum, UNFPA and the Sudanese Red Crescent Society (SRCS) distributed 1,350 dignity kits in the affected areas of Wad Ramli, Al Gaili and Abu Tilaiha.

In White Nile, UNFPA supported the national NGO CAFA to establish mobile clinics providing sexual reproductive health (SRH) and gender-based violence services in El Salam locality. In addition, 27 women of reproductive age received dignity kits.

In North Kordofan, UNFPA supported SMOH to distribute 225 dignity kits in Jebrat El Sheikh and Um Rawaba localities. More dignity kits will be distributed.

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

Gaps

There are gaps in the supply of dignity kits for affected women and girls of reproductive health age. Proper mapping of gender-based violence services in affected localities is needed in order to establish referral mechanisms.

EMERGENCY RESPONSE (23 hours ago)

Water, Sanitation and Hygiene (WASH) Sector Flood Response

Sector Overview

In Khartoum, UNHCR and Sudan's Commission for Refugees (COR) had 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 Aulya localities.

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

Response

In Khartoum, 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, personal protective equipment, and larvae collection kits. UNICEF provided five water reservoirs.

The Ministry of Health (MoH) in Khartoum released about 2.89 million Sudanese pounds (about US\$64,000) for the construction of 300 emergency latrines; labour costs for the disinfection and cleaning of latrines; chlorination of water sources, including supervision and monitoring; and chlorine tablets.

In South Kordofan, WHO activated technical meetings with the SMoH. Meetings are held every two days to exchange updates. In addition, WHO and the health sector activated reporting from 203 health facilities to strengthen the surveillance system. Water quality monitoring, vector control campaigns, and sanitation and hygiene promotion activities are ongoing in all affected areas. The international NGO Goal is carrying out water quality monitoring, vector control, and sanitation and hygiene promotion activities in Abu Kershola locality, while the SMoH—with the support of WHO—is covering El Abassiya, Rashad and Talodi localities. UNICEF also supported the SMoH to conduct health promotion activities in all affected areas and has provided slabs for emergency latrines in Abu Kershola.

In Kassala, UNICEF provided 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. Vector control activities are ongoing and 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, 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, 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 chlorine tablets, 2,150 jerry cans and 50 cartons of soap.

UNICEF's Communication for Development Section, in partnership with the SMOH-Health Promotion Unit, trained 200 youth volunteers from Jabal Aulia, Sharq el Nile and Khartoum North localities of Khartoum state on flood response. These 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. The community initiatives are divided into six groups and are linked to health promotion offices in each locality. They receive interactive training to enhance their knowledge on water-borne diseases and prevention methods, as well as interpersonal communication skill and using social media in social mobilization. The trained volunteers will conduct behaviour change activities in affected areas.

Gaps

In Khartoum, WASH services including waste collection and draining of stagnant water is needed. In addition, more hygiene promotion campaigns are required in all affected areas.

In Kassala, 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 (23 hours ago)

Refugee Flood Response

UNHCR will support refugee families affected by heavy rains and floods across the country. UNHCR will also provide NFI assistance to host community families based on assessed needs. Refugee camps in White Nile and East Darfur needed repairs to camp infrastructure. In Khartoum State, UNHCR will support with NFIs, nutrition, as well as water, sanitation and hygiene assistance for both refugee and host communities in Khartoum State.

RESPONSE

In Khartoum, flooding in Jebel Aulia locality has affected 250 refugee families in Dar Es Salaam Block 7 "Open Area" and over 400 families in Bantiu "Open Area", based on a recent rapid needs assessment conducted by Sudan's Commission for Refugees (COR). At least 426 latrines have been destroyed in Bantiu. Roads to Bantiu and the Dar Es Salaam "Open Area" sites are blocked and will need to be repaired to ensure sustained access to refugee families. Water drainage ditches in Dar Es Salaam Block 7 have collapsed and also need to be repaired. Vector control is urgently needed to mitigate disease outbreaks and risks associated with stagnant water.

In White Nile, refugee camps on the western bank of the White Nile River in El Salam locality have been inaccessible due to washed out roads. However, UNHCR and COR teams were able to reach Al Redis I and II, Jouri and Al Kashafa refugee camps to carry out a rapid assessment of flood damage. The assessments identified damage to camp infrastructures such as classrooms, distribution waiting areas, police stations, clinic waiting areas; distribution waiting areas; child-friendly spaces; and warehouses. UNHCR and COR completed an NFI distributions in the 'Open Areas'



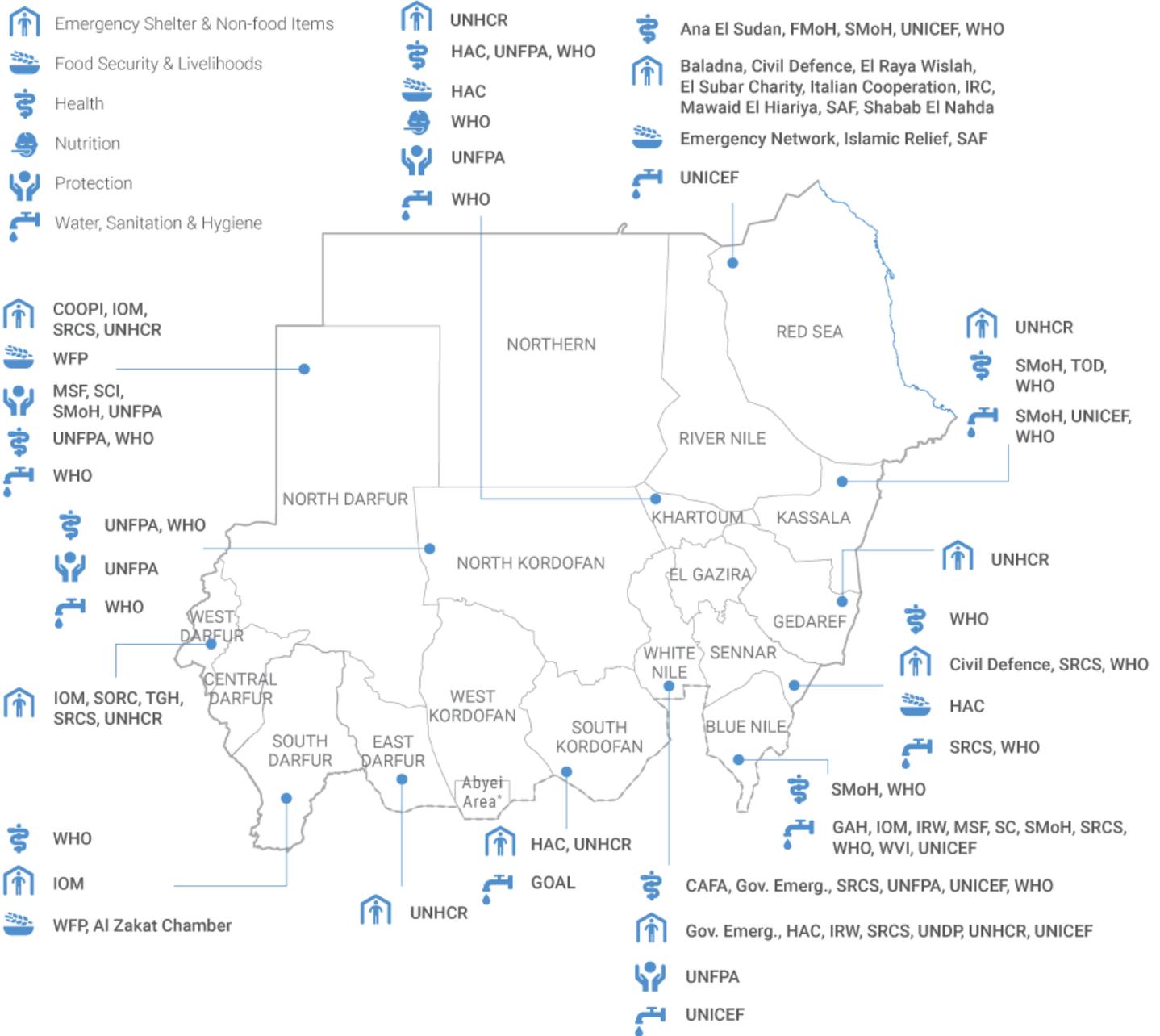
refugee sites in Sharq El Nile, Umbadda and Jebel Aulia localities in July/early August, as part of rainy season preparedness, including host communities, ahead of the rains. UNHCR, the international NGO Plan, the national NGOs ADRA and CAFOD, and the Qatar Foundation are supporting on NFI assistance for affected refugee families across the state.

In East Darfur, both Kario and Al Nimir refugee camps have been affected, with damage to registration and reception centres reported. About 50 refugee families in Kario have been affected and heavy rains have damaged the shelters of nearly 200 refugee families in Al Nimir. The road to El Nimir refuge camp has been washed away while the road to Kario is very badly damaged. HAC and WHO are assessing affected localities and host communities in the state.

Rainy season preparedness activities were carried out in both camps before the rainy season. Blankets and plastic sheets were distributed, in addition to the cleaning of drainage systems and haffirs in both camps. Extensive flood prevention and maintenance had been completed in 2018 for Kario and El Ferdous settlements, as both sites are very flood prone.

VISUAL (20 days ago)

Map of Sectors Responding to Floods by State



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

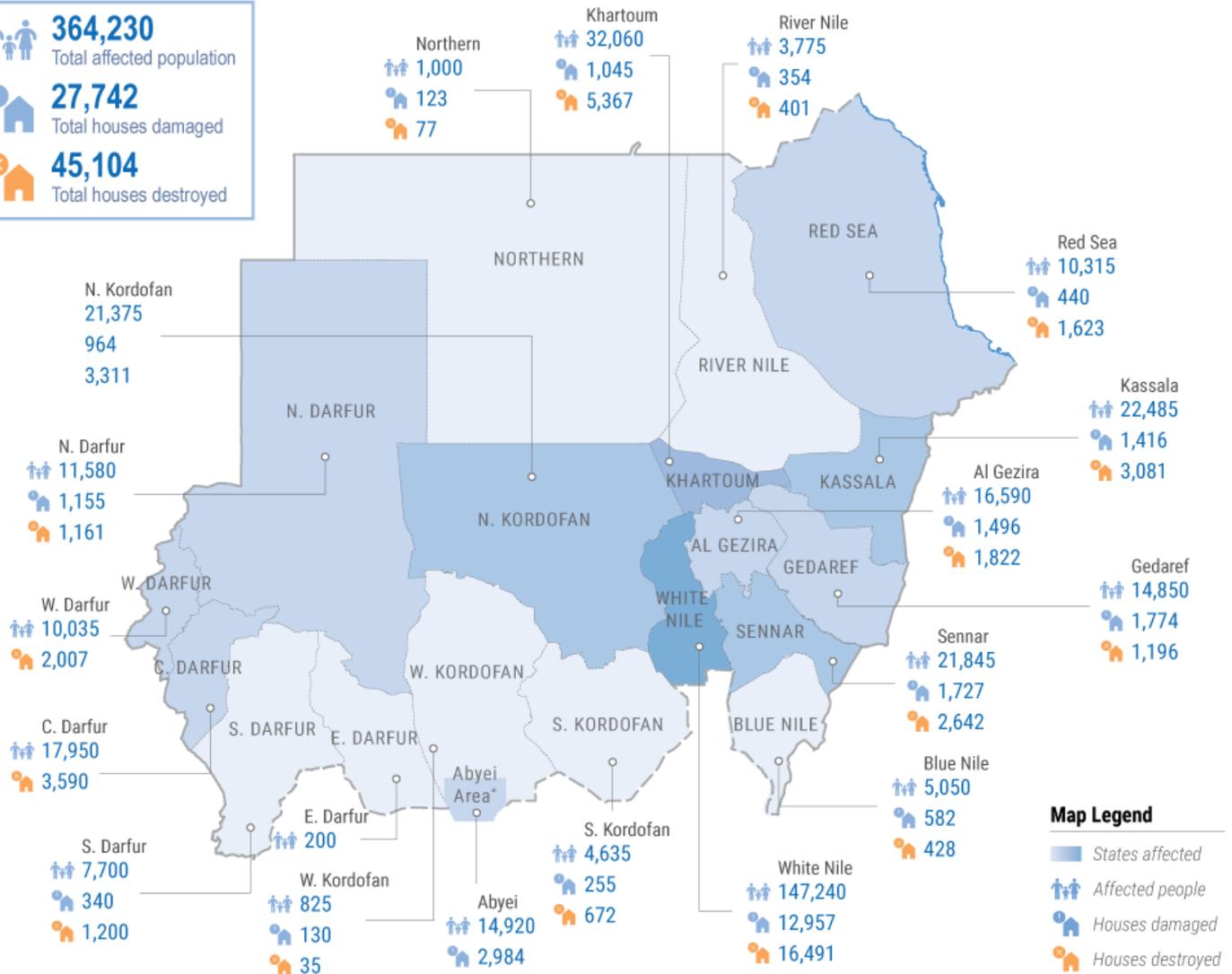
VISUAL (4 hours ago)

MAP: Floods across Sudan (As of 19 September 2019)

364,230
Total affected population

27,742
Total houses damaged

45,104
Total houses destroyed



Map Legend

- States affected
- Affected people
- Houses damaged
- Houses destroyed

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

Source: HAC and partners

OCHA coordinates the global emergency response to save lives and protect people in humanitarian crises. We advocate for effective and principled humanitarian action by all, for all.

- <https://www.unocha.org/sudan>
- <https://reliefweb.int/country/sdn>
- <https://www.humanitarianresponse.info/en/operations/sudan>

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