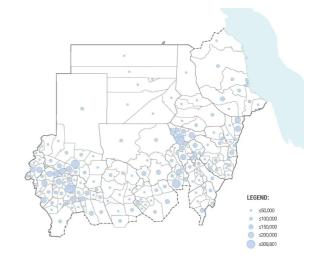
HIGHLIGHTS (5 Dec 2019)

- In Sudan, 9.3 million people—nearly one in four—will need assistance in 2020 according to the newly launch Global Humanitarian Overview
- IOM registers 14,500 IDPs and 111,500 returnees across the country in January-September 2019
- Over 50 national NGOs de-registered in Sudan
- More suspected cases of diphtheria, dengue fever, Rift Valley fever (RVF) and chikungunya were reported across the country



2020 estimates of People in Need in Sudan by Location

KEY FIGURES

9.3M

5M

People in need (2020) People targeted (2020)

343

Suspected Cholera cases

4

States with cholera

FUNDING (2019)

\$1.1B

\$587.8N

Received



FTS: https://fts.unocha.org/appeal s/670/summary

CONTACTS

Paola Emerson

Head of Office emersonp@un.org

Mary Keller

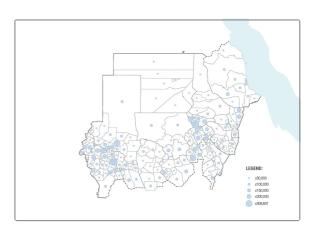
Head, Monitoring and Reporting kellerm@un.org

FEATURE (5 Dec 2019)

United Nations asks the world to invest \$29 billion in humanity in 2020

On 4 December, the United Nations Global Humanitarian Overview (GHO) for 2020 was launched in Geneva with simultaneous launches in Berlin, Brussels, London and Washington, D.C. The GHO is the most comprehensive, authoritative and evidence-based assessment of world's humanitarian needs.

In 2020, nearly 168 million people will need humanitarian assistance and protection. This represents one in about 45 people in the world and is the highest figure in decades. The United



2020 People in need by location in Sudan

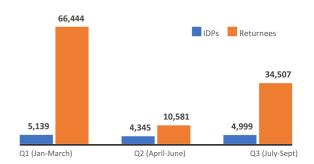
https://reports.unocha.org/en/country/sudan/ Downloaded: 5 Dec 2019 Nations and partner organizations aim to assist nearly 109 million of the most vulnerable people. This will require funding of US\$29 billion.

In Sudan, 9.3 million people—nearly one in four—will need assistance in 2020, of whom 5 million are targeted to receive humanitarian assistance. The funding needed for these humanitarian interventions is \$1.4 billion. A major factor driving humanitarian needs in Sudan is the economic crisis. High inflation rates—which stands at 58 per cent, and rising prices are diminishing people's ability to cope and contributing to worsening food insecurity. Years of economic stagnation and little investment in already weak public systems have deepened needs across the country including in the central and eastern regions of Sudan. Although initial reports indicate there was a relatively good harvest in 2019, it will not counteract the impact of price inflation. At least 17.7 million people (42 per cent of the population) suffer from some level of food insecurity. About 6.2 million people need food and livelihoods assistance. Malnutrition rates are high across the country – some 2.4 million children are acutely malnourished. For more information on global humanitarian needs in 2020, click here for the GHO document

FEATURE (5 Dec 2019)

IOM registers 14,500 IDPs and 111,500 returnees across the country in January-September 2019

In the first three quarters of 2019, the International Organization for Migration (IOM) registered 14,500 IDPs and 111,500 returnees in six states in Sudan. The highest number of IDP registrations was in South Darfur (5,800 people) and the highest number of returnees registered was in North Darfur (44,500 people). Returns have been recorded in all Darfur states, most likely due to the improved security, cessation of hostilities and peace-building initiatives of the Government of Sudan and partners.



Registration of IDPs and returnees by quarter

There are still concerns about services in return areas, which often lack even the most basic of services that can impact the sustainability of these returns. The Government with the assistance of partners will need to ensure that return locations have the necessary basic services, including, protection, water, sanitation, hygiene, health, nutrition and education.

IOM uses the displacement tracking matrix (DTM) system to track and monitor displacement and population movements. It is designed to regularly and systematically capture, process and disseminate information to provide a better understanding of the movements and evolving needs of displaced populations, whether on site or en route. It is comprised of four distinct components; namely, mobility tracking, registration, flow monitoring and surveying. Registration data is used for beneficiary selection, vulnerability targeting and programming.

The DTM methodology refers to the following definitions:

- IDPs are considered all Sudanese persons who have been forced or obliged to flee from their habitual residence since 2003 and subsequently sought safety in a different location.
- Returnees are considered all Sudanese persons who were previously displaced from their habitual residence since 2003 and have now voluntarily returned to the location of their habitual residence-irrespective of whether they have returned to their former residence or to another shelter type.



Click here for the IOM Sudan DTM report, Quarter 1 (<u>January – March</u>) Click here for the IOM Sudan DTM report, Quarter 2 (<u>April – June</u>) Click here for the IOM Sudan DTM report, Quarter 3 (<u>July – September</u>)

FEATURE (5 Dec 2019)

Humanitarian organizations to ensure that people are not affected by the closure of national NGOs

Humanitarian organizations in Sudan are working with the Government to ensure that life-saving activities continue uninterrupted and that people receiving assistance are not affected by the deregistration of over 50 national NGOs by the Humanitarian Aid Commission (HAC) Registrar General. Decisions 45, 47 (issued on 21 November), and 49 (issued on 24 November cancelled the registration of these national NGOs, appropriated their assets and property, and froze their bank accounts both in and outside Sudan.

The UN and its partners will request HAC support in expediting new technical agreements, should they be needed. If necessary, to ensure continuity of assistance to people in need during this period, the UN will also request international NGOs be allowed to directly implement affected programmes, while working on longer-term solutions. Also, the humanitarian community appeals for an opportunity to present lists of assets, funds, records and data belonging to the humanitarian community that were under the custody of these national non-government organisations to federal HAC for consideration for release to the humanitarian community in support of continuation of delivery of lifesaving humanitarian assistance.

Following the HAC Registrar's decision, the Ministry of Labour and Social Development clarified in a press statement that the decisions were issued because the national NGOs involved had committed violations with regards to registration, funding, and technical agreements. In response, some of the affected national NGOs announced in a news conference that they will take legal action to overturn the federal HAC decision. The affected organizations have written a memorandum of protest requesting the immediate nullification of the HAC Registrar's decision; an investigation into the alleged violations to allow them to defend their reputation and programmes; a revision of the 2006 Organization of Voluntary and Humanitarian Work Act (bringing it in line with the Constitutional Convention, International Human Rights Law and the regional and international obligations of the Sudan); and strengthening role and rights of civil society organizations to enable them to carry out their activities. Many of these national NGOs had been assisting vulnerable people in various parts of the country.

In South Kordofan, the State HAC appealed to the office of the Wali to allow national NGOs whose registration was revoked to continue activities in the state. HAC rated the performance of one of the NGOs whose registration was revoked—as active. In South Kordofan, this NGO is implementing programmes in partnership with WFP, UNICEF and other humanitarian partners.

In Kassala State, the Wali (Governor) wrote a letter to the Bank of Sudan in Kassala on 2 December, asking them to unblock the bank accounts of the national NGO Talaweit, which is one of the national NGOs whose registration was revoked. The Wali justified his request due to the humanitarian nature of Talaweit's projects. Similarly, on 25 November HAC in South Kordofan appealed to the Wali of the state to exempt the national NGO Mubadiroon from decree 47 which revoked its registration amongst 31 other national NGO for their ties to the government of Al-Bashir.

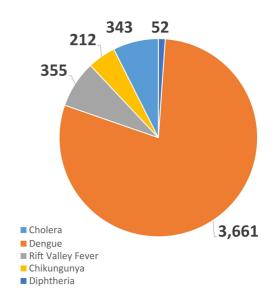
TRENDS (5 Dec 2019)

Trends in communicable diseases

More suspected cases of diphtheria, dengue fever, Rift Valley fever (RVF) and chikungunya were reported across the country, according to the Sudan Federal Ministry of Health (FMoH). As of 3 December 2019, the cumulative numbers of respective disease are as follows:

- 52 cases of diphtheria (including seven deaths)
- 3,661 dengue fever cases (11 deaths)
- 355 rift valley fever cases (11 deaths)
- 212 chikungunya cases (four deaths)
- 343 cholera cases (11 deaths)

These outbreaks came after the rainy season and floods that aggravated certain factors that contributed to the emergence of these diseases. Moreover, according to seasonal patterns there is a likely increase in measles cases from January-February and second wave of cholera cases from January-February in eastern



2019 breakdown of disease outbreaks in Sudan

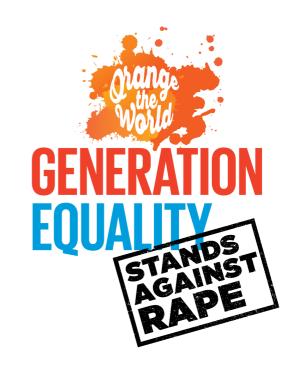
Sudan (related to the onset of the local rainy season, which differs from the country's overall rainy season).

FEATURE (28 Nov 2019)

16 days of activism against gender-based violence

25 November marks the International Day Against Violence Against Women and the launch of the 16 days of activism against gender-based violence. These 16 days will demonstrate the solidarity with women around the world to stop violence against women and to create the tools and concrete actions to implement promises made to eliminate violence against women.

In Sudan, the event was launched jointly by the United Nations Population Fund (UNFPA) and the Ministry of Labour and Social Development under the theme of "Together for sustainable protection of women, girls and children from gender-based violence." The Ministry of Labour and Social Development is currently working to amend Sudanese laws that discriminate against women and girls. The Ministry will look into issues of domestic violence, women's rights, child marriage and female genital mutilation (FGM) both at the federal and state levels through institutions already established for the purpose of protecting women and girls. It is not only laws that have to be



changed but also the cultural norms, practices and traditions that harm women and girls and violate their basic human rights. Awareness-raising will play a major part in this endeavour.

This international campaign originated from the Center for Women's Global Leadership in 1991. The dates chosen for the campaign symbolically link violence against women and human rights to emphasize that violence is a violation of human rights. The campaign runs from 25 November (International Day Against Violence Against Women) until 10



December (International Human Rights Day).

The Convention on Elimination of All Forms of Discrimination Against Women states that discrimination against women shall mean "any distinction, exclusion or restriction made on the basis of sex, which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field."

Currently, Sudan is working towards endorsing the Convention on the Elimination of Discrimination against Women (CEDAW) and work is underway to endorse it. Meanwhile, gender-based violence (GBV) continues to be a major concern in Sudan with 1.8 million people in dire need of GBV prevention, mitigation and response. Women and girls continue to suffer disproportionately from GBV, poverty and violations of basic rights due to insecurity, low economic status and lack of livelihood opportunities, lack of community awareness on women's rights due to cultural and societal norms. About 55 per cent of displaced people are women and girls, with 27 per cent of those women below the age of 18. Female genital mutilation (FGM) remains prevalent in Sudan, affecting 87 per cent of women aged 15 to 49 years and 32 per cent of girls aged up to 14 years old.

FEATURE (28 Nov 2019)

UN Humanitarian Chief calls on the international community to scale up humanitarian support to Sudan

Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator Mark Lowcock calls on the international community to act faster to scale up humanitarian support to Sudan. The humanitarian situation is deteriorating for millions of people, including in the central and eastern regions, as the country strives to address the effects of erratic weather, multiple disease outbreaks and the economic crisis.

While conflict is still a major driver of humanitarian needs in Sudan, incidents have significantly reduced in recent years. The deepening economic crisis, the climate crisis and pockets of violence also continue to drive humanitarian needs. More than 8.5



million people require food, nutrition, protection or other assistance to survive and millions of others struggle to make ends meet. These numbers are projected to grow. Years of conflict have left nearly two million people displaced in the Darfur, South Kordofan, and Blue Nile areas of Sudan.

During a visit to Kassala, in eastern Sudan, the UN humanitarian chief met local communities who have been affected by recent economic and climate shocks and recurrent disease outbreaks. "The economic crisis has a very direct impact on ordinary people's lives, particularly for women and girls. They live in an area with ongoing dengue and malaria outbreaks, yet cannot afford to pay for medicines. And recurrent droughts and floods means that they cannot grow enough food".

Five Facts about Kassala, Sudan

 The state is prone to droughts and localized dry spells, which impact food security, livelihoods and nutrition status of people across the State.



- Kassala has a population of about 2.6 million people, of whom over 430,000 are at crisis levels of food
 insecurity, according to the Integrated Food Security Phase Classification (IPC) system. Over 50 per cent of the
 population are at stressed levels of food insecurity.
- 95 per cent of the reported dengue fever cases in Sudan are located in Kassala.
- Kassala has some of the highest levels of global acute malnutrition (GAM) in the country, with an estimated 153,000 children under five years above the GAM threshold of 15 per cent. Chronic food insecurity is one of the facts that contributes to these high levels of malnutrition.
- Only 13 per cent of the population (except for the State capital, Kassala town) have access to safe drinking water source.

MEDIA (28 Nov 2019)



View this Video: https://www.youtube.com/watch?v=43elAod4lps

UN humanitarian chief Mark Lowcock calls on the international community to scale up humanitarian support to Sudan. The humanitarian situation is deteriorating for millions of people, particularly in the central and eastern regions, as the country strives to address the effects of erratic weather, multiple disease outbreaks and the economic crisis.

FEATURE (28 Nov 2019)

About 5,700 people arrive from SPLM-N areas in South Kordofan seeking assistance and basic services



Since mid-November, hundreds of people who were affected by conflict in South Kordofan have been arriving from areas controlled by the Sudan People's Liberation Movement (SPLM-N) seeking access to basic services, according to the Humanitarian Aid Commission (HAC). The arrivals were prompted by improved security situation and the conducive environment created by ongoing peace negotiations between the Government of Sudan and armed movements, including SPLM-N, according to community leaders. There has been engagement at the community level for peaceful coexistence between people living in government and SPLM-N controlled areas since October.

Overall, at least 5,700 people arrived from SPLM-N areas in Kadugli, Dalami and Dilling localities so far in 2019, according to



HAC and humanitarian partners. Of this number about 2,000 (35 per cent) have arrived in Kadugli town in November alone. More people are expected, according to community leaders and HAC. IOM is registering between 200 and 300 people who arrive daily. UN agencies and NGO partners are providing them with initial food, health and other assistance. WFP will provide food packages. The UN Refugee agency (UNHCR) and the International Organization for Migration (IOM) will provide non-food and shelter assistance once IOM finalises and submits the list of returnees. OCHA is mobilizing partners to address the needs of the newly arrived people as well as the delivery of assistance in SPLM-N areas to minimise displacement. This is in line with new HAC directive on unhindered access to all areas including SPLM-N controlled areas for humanitarian assistance.

There have also been reports of the arrival of an estimated 2,500 people in El Moreib village in El Abbasiya locality, according to humanitarian partners. These numbers have yet to be registered. They had reportedly fled to areas controlled by the SPLM-N when the conflict started in 2011 and are now returning to their home areas due to the improvement in the security situation. Government security forces in El Moreib area are allowing all people from SPLM-N-controlled areas to access the market.

After the conflict started between government security forces and SPLM-N in South Kordofan in June 2011, thousands of people were displaced. About 235,000 people were displaced in South Kordofan and Blue Nile (in areas under the control of the government) and the humanitarian arm of the SPLM-N estimated that a further 545,000 people were displaced in areas under their control.

In addition, there are about 117,000 Sudanese refugees from South Kordofan in Unity State of South Sudan.

FEATURE (28 Nov 2019)

Rift Valley Fever outbreak in Sudan

The Sudanese Federal Ministry of Health (FMoH) has announced an outbreak of Rift Valley Fever (RVF) in the country, with a total of 345 suspected RVF cases—including 11 related deaths—reported in Red Sea (128), River Nile (212), Khartoum (1), White Nile (1), Kassala (2), and Gedaref (1) states, as of 26 November 2019. The most affected age group is 15 to 45 years, which accounts for 83 per cent of the total suspected cases. The male to female ratio is 2.6, with a high proportion of the cases



States with Rift Valley Fever



being farmers (37.5 per cent). RVF is endemic in Sudan and three outbreaks affecting people have been documented in 1973, 1976, and 2008. During the outbreak in 2008, a total of 747 laboratory-confirmed cases were reported, including 230 deaths.

RVF is a mosquito-borne viral disease that is transmitted to humans from animals. Most human infections are spread to humans through contact with blood, organs, or milk from infected animals. Herders, farmers, slaughterhouse workers, and veterinarians have an increased risk of infection. From 25 September to 3 November 2019, the Central Veterinary Research Laboratory in Khartoum confirmed RVF cases among animals in Red Sea and River Nile states. The current outbreak can be linked to the recent floods in the country that have left large pools of stagnant water, which are breeding sites for various types of vectors such as mosquitoes. RVF has been reported in six states affected by the floods this year.

Response

In response to the outbreak, RVF task force committees have been activated in the most affected states of Red Sea and River Nile. Active vector control activities with household inspections and fogging to eliminate mosquitoes are ongoing in affected areas. In the affected villages in Red Sea State, health centres were established with a capacity of 11 beds, laboratory equipment, drugs, and supplies to provide health services for those affected. In addition, the Veterinary Epidemiology Department of the Ministry of Animal Resources conducted vector control in four animal enclosures in affected villages.

Prevention

Since outbreaks of RVF in animals precede human cases, it is necessary to ensure active animal health surveillance systems are in place in endemic regions to provide early warning for veterinary and public health authorities. In addition, routine animal vaccination is recommended. However, vaccination campaigns are not recommended during an outbreak as they may intensify transmission among the herd through needle propagation of the virus. To reduce human infection people should be aware of the risk factors of RVF infection and practice measures to prevent mosquito bites and utilizing preventative measures (wearing gloves etc.) when handling sick animals. Other preventative measures include:

- · Adopting safe animal husbandry and slaughtering practices.
- Refraining from the consumption of raw or unpasteurized milk or animal tissue. In endemic regions, all animal products should be thoroughly cooked before eating.
- Reducing the risk of mosquito bites through the implementation of vector control activities (e.g. insecticide spraying and use of larvicidal to reduce mosquito breeding sites), use of insecticide-impregnated mosquito nets and repellents, light- coloured clothing (long-sleeved shirts and trousers).
- Restricting or banning the movement of livestock to reduce the spread of the virus from infected to uninfected
 areas.

Impact of RVF in people's livelihoods and livestock exports

RVF can cause significant economic losses due to livestock travel and trade restrictions, as well as high mortality and abortion rates among infected animals. This is especially worrisome for poorer families who depend on their livestock as the main source of food and livelihoods. Nationally, loss of earnings from livestock trade can affect the economy and in the context of Sudan's current economic crisis and weak health system, this can have negative consequences.

On 18 October, the Saudi Arabian Ministry of Environment, Water and Agriculture announced a ban on importing livestock from Sudan following confirmation from the World Organization for Animal Health (OIE) on documented cases of RVF in the country. According to the Ministry, Saudi Arabia imported 5 million heads of cattle from Sudan



during the last Hijri year.

For more information on Rift Valley Fever visit:

World Health Organization (WHO) website

Centers for Disease Control and Prevention (CDC) website

European Centre for Disease Prevention and Control (ECDC) website

FEATURE (21 Nov 2019)

Prices of staple foods decline, but still at record or near record highs

Prices of locally grown sorghum and millet in Sudan began to decline seasonally in October with the start of the 2019 harvest, while prices of imported wheat increased, according to FAO's latest Food Price Monitoring and Analysis (FPMA) Bulletin. However, prices of cereals are still at record or near record levels despite the above-average 2018 harvest and overall favourable prospects for the current 2019-2020 crop harvest. For instance, the October 2019 prices of sorghum (feterita) in Gedaref and Khartoum were about five times (increase of 385% and 414% respectively) of the October 2017 prices. The prices of millet in Khartoum and Nyala in October 2019 were five and three times of



the October 2017 prices respectively (an increase of 417% and 200%), according to the FPMA Bulletin.

The June-September rainy season was characterized by above-average rainfall, which benefitted vegetation conditions and boosted yields, although they also triggered floods that resulted in localized losses of standing crops. The exceptionally high level of food prices is the result of the significant depreciation of the country's currency, coupled with fuel shortages and soaring prices of agricultural inputs, which inflated production and transportation costs. The weak currency, coupled with shortages of hard currency, restrained the country's ability to import food and non-food items, including wheat flour and fuel, thus causing shortages and higher prices, according to the FPMA Bulletin.

On 7 November, the state news agency SUNA reported that Sudan's annual inflation in October was recorded at 57.7%. The inflation rate in September was 53.5%, according to an <u>update from the Central Bureau of Statistics (CBS)</u>. Inflation rate increased due to the rising prices of food and beverages, SUNA reported.

In its latest <u>Sudan Food Security Outlook for October 2019 – May 2020</u>, FEWS NET reports that high staple food prices resulting from significant macroeconomic difficulties, combined with persistent insecurity in conflict-affected areas and flooding late in the rainy season, are contributing to higher than normal emergency food assistance needs in Sudan in late 2019. These needs are expected to persist into at least May 2020, particularly as the lean season approaches in agricultural and agropastoral areas, FEWS NET estimates.).

For more information visit:

FPMA Bulletin, link

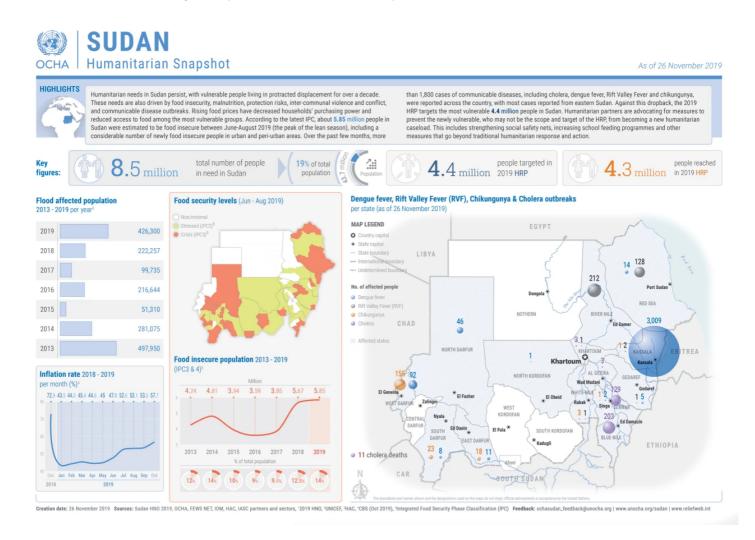
CBS updates and reports, link



FEWS NET on Sudan, link

VISUAL (28 Nov 2019)

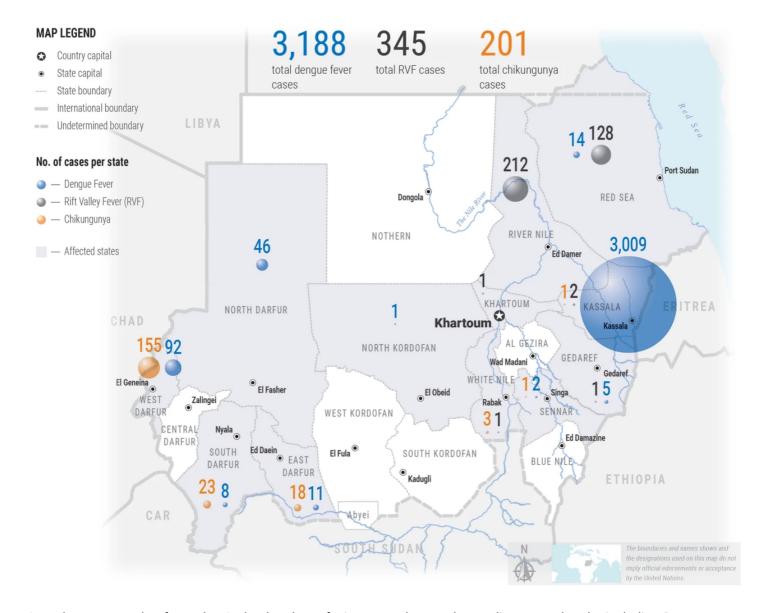
Sudan Humanitarian Snapshot (as of 26 November 2019)



Click here for a PDF version

VISUAL (28 Nov 2019)

Dengue Fever, Rift Valley Fever (RVF) and Chikungunya Outbreaks in Sudan (26 November 2019)



Over the past couple of months, Sudan has been facing several vector-borne disease outbreaks including Dengue Fever, Rift Valley Fever (RVF) and Chikungunya. These outbreaks can be linked to the recent floods in the country that have left large pools of stagnant water, which are breeding sites for vectors such as mosquitoes. Government authorities and humanitarian partners are actively responding to these outbreaks across the country, providing health assistance, and vector control interventions.

VISUAL (28 Nov 2019)

OCHA Sudan Pooled Funds Dashboard (January - November 2019)



In the first eleven months of 2019, OCHA Sudan processed US\$101.5 million, through its pooled funds the Central Emergency Response Fund (CERF) and the Sudan Humanitarian Fund (SHF).

48.7 22.5 21.7 19.3 11.3 9.0 7.8 5.0 32.4 61.1 These funds helped humanitarian partners in Sudan respond to humanitarian needs in the country. By leveraging their comparative advantages - such as CERF's disbursement 6 speed and SHF's direct funding for Non-Netherlands Norway Denmark Canada Belgium Ireland Finland Australia Emirates Others* Governmental Organizations (NGOs) - the humanitarian community rapidly scaled * Others (member states, regional authorities & private contributions) up humanitarian action and was able to deliver SHF ALLOCATIONS an effective collective response. **SHF DONORS 2019 (\$M)** by partner type 29.0 8.0 3.3 2.0 7.6 3.4 0.6 0.3 SHF & CERF ALLOCATIONS / **BENEFICIARIES** by sector' 8% 70% ■ SHF ■ CERF \$**40**.6M \$4.4M \$**58**.1 million \$43.4 million 1 # 23% G . total SHF allocations total CERF allocations United United Sweden Ireland Germany Switzerland Norway Korea \$13.2M 4.0 million 4.5 million SHF beneficiaries CERF beneficiaries SHF ALLOCATIONS by state

CERF DONORS 2019 (\$M) - Global



million total SHF allocation (US\$) RED SEA Port Sudan Funding allocated (\$) RIVER NILE 0.1M _{• Ed Da} N DARFUR 2.1_M 1.0M 9.6M KHARTOUM Khartoum N. KORDOFAN 0.5M 5.1_M AL GEZIRA Wad Madani GEDAREF 0.6M 0.2M · Rabak 2.9M C. DARFL 6.4M Ed Da S. KORDOFAN • El Fula Ed Daein 7.2M S. DARFUR E. DARFUR 6.0M 9.0M 0.6M



* Since there are several multi- areas projects, the beneficiary number





% 27% 21% 27% 24%

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

Creation Date: 11 November 2019 Source: Sudan Humanitarian Fund SHF Feedback: ochasudan_feedback@un.org | www.unocha.org/sudan | www.reliefweb.int

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https://www.unocha.org/sudan

https://reliefweb.int/country/sdn

https://www.humanitarianresponse.info/en/operations/sudan

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