

SUDAN: West Darfur Emergency

Situation Report No. 2

As of 4 May 2021

This report is produced by OCHA Sudan in collaboration with humanitarian partners. It is issued by OCHA Sudan and covers the period from 27 April to 4 May 2021. The next report will be issued on or around 10 May.

HIGHLIGHTS

- The security situation in Ag Geneina town remains tense and unpredictable.
- The Jamarik market in Ag Geneina has been closed until further notice due to an increase in criminal incidents.
- In addition to the areas of Al Jabal, Abuzar and Krinding, security forces were deployed in Gokar and Muli villages near Ag Geneina.
- The top needs of the newly displaced people are food, non-food items, water, shelter, protection, health and education.
- Humanitarian organizations continue to scale up operations. As of 3 May, about 124,400 people have received food, and over 51,000 people accessed healthcare services in Ag Geneina locality.
- Over 30,000 people have access to at least 10 litres of safe water per day.
- About US\$65 million is urgently needed to meet the urgent lifesaving needs of the displaced people in West Darfur.



124,400

People reached

169,000

Internally displaced people (January-April 2021)

250,000

targeted for assistance

65,000

Newly displaced (April 2021)

SITUATION OVERVIEW

The security situation in Ag Geneina town is tense and unpredictable, with criminal incidents reported frequently. On 28 April, Al Jamarik market in Ag Geneina was closed until further notice following the decision of the Executive Director of Ag Geneina locality. The decision came after an increase in criminal acts by armed groups and cases of killings inside the market. In the latest incident, on 27 April, one person was killed and two others were wounded at the market.

On 29 April, state authorities said the security situation in Ag Geneina, particularly the southern parts of the town, has improved and encouraged aid agencies to resume operations in those areas. The Humanitarian Aid Commission (HAC) reported that there are 11 new gathering sites in addition to the 97 existing sites, with many people in those sites requiring assistance. Please see the sections below to see details about the response.

Humanitarian organizations highlighted the issue of security and safety for people displaced and aid workers. They raised their concerns about the lack of measures to protect assets and prevent the looting of humanitarian supplies. HAC will discuss these issues with members of the state security committee.

On 29 April, an inter-agency needs assessment was carried out in potential return areas in Al Jabal neighbourhood. A heavy presence of security forces in the area was observed. In addition to improved security, the provision of basic services, such as food, water, shelter and non-food items (NFIs) need to resume in this neighbourhood. The returnees also raised the need for psychosocial support for children. Community leaders are encouraging internally displaced persons (IDPs) to return home saying the security situation has improved. Direct observations, especially in newly established gathering sites, showed high psychological distress levels among IDP women and girls, over-crowding, and a lack of essential services such as water, health, shelter, and food. Protection, including gender-based violence (GBV), sexual harassment, and physical assault, were reported as top concerns in the IDP gathering sites and surrounding areas.

Whilst humanitarians are responding to the urgent needs there are shortages of funds which could lead to the suspension of support to several health facilities. The existing capacities are not sufficient to cope with the caseload. With the rainy season approaching, scaling up given current capacity limitations can prove to be a major challenge.

According to the International Organization for Migration (IOM), in the first four months of 2021 close to 237,000 people were displaced by conflict in Darfur - more than four times the 58,000 people displaced by conflict in 2020 - creating a significant increase in new needs.

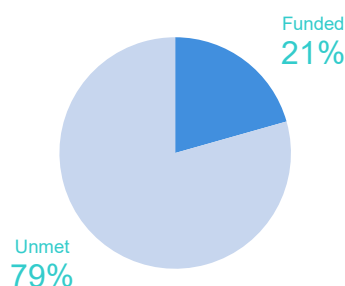
Due to the political situation in neighbouring Chad, information available suggests a potential influx of Chadian refugees into North, Central, and West Darfur states. UNHCR has developed four response planning scenarios with a planning figure of -100,000 refugees.

FUNDING

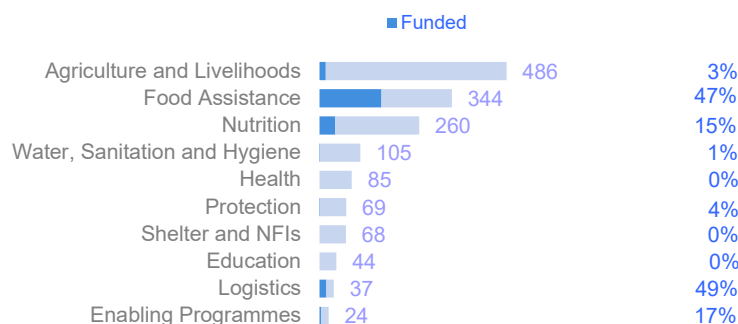
As of 4 May, humanitarian funding is US\$296.6 million, including \$197.8 million for the HRP (10.2 per cent covered).

Sudan Consolidated Appeal 2021

US\$1.9 billion requested



Funding by sector (in million US\$)



All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: fts@un.org

HUMANITARIAN RESPONSE

Education

Needs

- Schools need hot meals, water, sanitation and hygiene (WASH) assistance.
- The education sector response needs to be multi-sectoral.

Response

- UNICEF and the State Ministry of Education are prioritizing the construction of 40 temporary learning spaces to accommodate grades 8 and 1 in time for the upcoming national examinations next month.

Gaps & Constraints

- The provision of space for the construction of the temporary learning spaces remains unresolved.

Food Security

Needs

- According to the latest analysis of the 645,000 people in West Darfur, 161,000 people are severely food insecure and need support.

124,000

People provided with food inside Ag Geneina

Response

- 124,000 people - three quarter of the people in need - were reached with a one-month food assistance package consisting of sorghum, pulses, oil, salt and high-energy biscuits.

Gaps & Constraints

- Livelihood opportunities and durable solutions are necessary to enable a phase-out of emergency food interventions.
- Once people return home, food for assets programmes can be setup.

Health and Nutrition

Needs

- Acute respiratory infections, diarrhoea and malaria are the main common diseases that need to be addressed.
- In the last two weeks, the State Ministry of Health (SMoH) has confirmed 61 COVID-19 cases, including four deaths.
- The situation in Ag Geneina is critical; all gathering points are congested and the key health concern is the possible large scale disease outbreaks, especially when the rains start.

51,373

People reached with basic medical services

Response

- Health services were provided to 51,373 people inside Ag Geneina and mobile clinics are supporting the displaced people in Kereneik and Beida.
- There are 36 static and mobile primary health care facilities. Twenty-one units are temporary and nine are mobile. Six of the facilities are established in Kereneik and Beida localities.

- At least 21 Community-based Management of Acute Malnutrition (CMAM) sites have been established in Ag Geneina, including in eight of the new gathering points. Six CMAM sites have been established outside Ag Geneina.
- The nutrition sector will conduct monthly screening in all the gathering points.

Gaps & Constraints

- Limited funding and the lack of medical supplies is a concern.



Protection – Child Protection

Needs

- Child Friendly Spaces (CFS) and the provision of psychosocial support (PSS) and other referral services.
- Family Tracing and Reunification (FTR) for Unaccompanied/Separated Children (UASC).
- Provision of clothes.
- Awareness raising to children and families on child protection (CP).
- Food - children are resorting to negative coping strategies such as begging, which exposes them to protection issues.
- Clearance of unexploded ordnances (UXOs) and provision of mine-awareness sessions.

4,608

Children reached by child protection partners

Response

- Established 15 CFS in gathering points with 45 animators providing child protection services.
- FTR services provided to 48 children, of whom 9 children have already been reunited with their families.
- 795 children received PSS.
- 238 girls received awareness on GBV including referral pathways.
- 2,400 children, 1,000 adolescent girls and women received CP awareness training
- 70 children were referred for additional support.
- Adolescent kits, recreation kits, tents and sitting mats were distributed.
- Established 14 community child protection networks (CBCPNs) and trained 180 people.
- Ongoing FTR assessment to register separated children.

Gaps & Constraints

- More CFS are needed.
- IDPs cannot afford to buy medicines since they have lost their Medical Insurance IDs during the crisis. This could give rise to negative coping strategies and protection issues.
- Huge needs and limited resources.



Protection – Gender-based violence

Needs

- The GBV sub-sector and its partners have identified 87,000 people to receive support.
- The inter-agency needs assessment identified protection, including GBV, sexual harassment, and physical assault, as top concerns in the IDP gathering sites and surrounding areas.
- High psychological distress levels among IDP women and girls, over-crowdedness, and lack of essential services were observed.

10K

People reached with PSS, PFA, Referral, FTR and CFS

Response

- Social workers from the State Ministry of Health and Social Welfare (SMoHSW) continue providing psychological first aid (PFA) and PSS services in IDP gathering sites and monitoring protection concerns, including GBV.
- The GBV working group has reached 1,123 women and girls and 170 men at the IDP gathering sites and provided awareness-raising sessions on GBV and available support services to vulnerable women and girls and survivors of GBV.
- Partners have distributed 1,884 dignity kits to vulnerable women and girls of reproductive age, this includes 634 kits in Algadyima School, 250 dignity kits in Albahoth gathering sites, and 865 dignity kits in the Science Academy gathering site.
- Women and girls have been sensitized on GBV, the updated referral pathways, personal hygiene, and how to use the dignity kits.
- Survivors of GBV continue to receive PSS and health support, including Clinical Management of Rape (CMR), at the GBV confidential corner in Ag Geneina Teaching Hospital.
- The GBV working group is coordinating with INGOs to extend CMR services in their existing health facilities and to include them in the GBV referral pathways.
- Transport for referral and financial assistance to GBV survivors and affected women and girls are also supported.

Gaps & Constraints

- The current funding gap for the six-month GBV emergency response plan - estimated at US\$2 million – is \$1.6 million.
- Material support, including dignity kits for about 50,000 women and girls of reproductive age in and outside Ag Geneina town, returnees to Krinding and other affected villages, and vulnerable host populations sheltering the displaced people.
- Support to maintain the services at the GBV confidential corner in Ag Geneina Teaching Hospital 24 hours a day and temporary confidential spaces outside of the gathering sites to provide PSS.
- There is a shortage of experienced GBV social workers and psychologists to cover all the gathering sites and affected areas outside of Ag Geneina.
- Shortage of safe spaces where women and girls can reconnect with their networks, get information and sensitization, and report incidents.
- Rapid capacity building (sensitization sessions) for first-line service providers targeting social workers, midwives, police, especially on referrals and survivor-centered approach to GBV.
- There is a need to reactivate and support community-based protection networks. This will help link affected communities to service providers.

Shelter/NFI

Response

- About 20,000 people in 18 new gathering sites in Ag Geneina have received full non-food item (NFI) kits.
- In April, 3,865 households at 25 gathering sites were provided NFIs. Another 600 families received NFIs on 3 May.
- Registration for the shelter assistance is ongoing in Gokar, Nyooro and Botingyo targeting 2,000 households for shelter cash support.
- 10,000 emergency shelter kits will be distributed amongst returnees in places of origin.

15,506

People reached with
NFIs

Gaps & Constraints

- There is a gap of 10,000 NFIs kits.
- One of the challenges is the continuous movement of the families from one location to another.
- There is a need for a functioning registration system - many IDPs have lost their personal identification documents.

Water, Sanitation and Hygiene

Needs

- The needs assessment of 19 April identified high priority issues including water provision, latrines, hygiene kits and solid waste management at the gathering sites.
- Many sites were identified as being at high-risk and need urgent assistance:
 - Water: 43 gathering points (78 per cent of total)
 - Sanitation: 45 gathering points (82 per cent of total)
 - Hygiene: 36 gathering points (65 per cent of total)

30,150

People reached with safe drinking water

Response

- 30,150 people have access to an average of 12 litres/day of safe drinking water thanks to water trucking activities.
- 16,350 people have access to gender-sensitive emergency latrines in 10 gathering points.
- 43,900 people have been reached with hygiene messages.
- 6 INGOs and 2 NNOs are providing WASH services to 58 gathering points, and one NGO operating in 10 nomadic areas.
- Sector contingency plan for the rainy season and a possible Cholera outbreak have been developed.

Gaps & Constraints

- The biggest challenge remains to be the lack of space to build emergency latrines in the IDP gathering points.
- Water supply is also becoming an issue, as water trucking to such a large population is not sustainable.
- Most of the affected population does not have enough water - on average they have access to less than five litres of water per day.
- The volatile security situation has delayed some of the planned activities and monitoring visits.
- The approaching rainy season poses a severe risk for water-borne disease outbreaks and preparedness is required.