

Sudan Regional Refugee Response Sitrep #3, 16 June - 15 July 2023



Pregnant and lactating women returnees from Sudan receive hygiene necessities, menstrual hygiene supplies and basic clothing at Bulukat transit site, Malakal, Upper Nile State, South Sudan. @UNFPA South Sudan.

Situation overview

Ongoing fighting in Sudan has now displaced more than 3 million people in less than three months of conflict. Over 2.4 million men, women and children have been displaced inside Sudan, and more than 650,000 people have sought shelter from the conflict in neighbouring countries.¹ As the violence shows few signs of easing, it's projected the number of people leaving Sudan will surpass 1 million by October 2023.

The continued influx of refugees, asylum seekers, returnees, and third-party nationals into the Central African Republic (CAR), Chad, Egypt, Ethiopia, and South Sudan is causing pressure on already limited resources. There is a lack of infrastructure and basic services in border

¹ All displacement figures are sourced from the [IOM Displacement Tracker](#). Accessed 14 July 2023.



areas and displacement sites, including for the delivery of lifesaving sexual and reproductive health (SRH) and gender-based violence (GBV) services.

Humanitarian needs

Sexual and reproductive health

Services for SRH, including family planning and emergency newborn and obstetric care (EmONC), are limited at points of destination in neighbouring countries. There have been reports of women giving birth in the open without medical support or supplies for themselves or their newborns.

Strengthening existing health facilities and scaling up SRH service delivery, including through the deployment of skilled healthcare providers/midwives, mobile clinics/teams, and the provision of life-saving supplies, remains a priority for UNFPA to ensure all women and girls have access to the health and protection services they need.

Gender-based violence

There are increasing reports of GBV. The risk of sexual violence is especially high when women and girls are on the move seeking safer locations, both inside Sudan and across borders. At points of destination many women and girls are housed in overcrowded settlement sites or sleeping out in the open, heightening protection risks. Competition for scarce resources is also fierce, increasing women and girls' vulnerabilities to sexual exploitation and abuse.

UNFPA is working with partners to ramp up urgently needed support and services to prevent and respond to GBV at reception/displacement sites for internally displaced people, including medical care; mental health and psychosocial support (MHPSS); case management; and supplies for the clinical management of rape (CMR).

Central African Republic

More than 16,000 asylum seekers and returnees have crossed the Sudanese border into CAR. The majority are women and children. Asylum seekers and returnees are being relocated from Am Dafok to Biroa. As of 12 July, around 1,170 people have been relocated.

UNFPA and humanitarian partners are coordinating their response efforts to provide lifesaving interventions in Biroa, where people are being relocated. Both the security context and the rainy season, however, are making the delivery of humanitarian aid and supplies extremely challenging.



Chad

Around 239,000 people (approximately 192,000 refugees and 46,000 Chadian returnees) have crossed the border into eastern Chad (into Ouaddaï, Wadi Fira and Sila provinces). More than 90 percent are women and children, including 25 percent who are of reproductive age and 5 percent who are currently pregnant.

The rainy season is thwarting efforts to reach those crossing the border and transport them to refugee camps; approximately 30 percent of new arrivals have been moved to existing displacement sites in the eastern provinces. Most new arrivals are still sleeping under trees in makeshift shelters, compromising women and girls' ability to access lifesaving SRH services and exacerbating protection risks.

UNFPA staff at the border in Chad have been reporting an increase in women affected by sexual violence as they flee conflict in Darfur and other parts of Sudan. In Ouaddaï, the province hosting most new arrivals from Sudan, women and girls have identified places where they do not feel safe, including certain camp alleys/streets; and places where they fetch water and/or wood in camp areas.

Egypt

Over 255,000 Sudanese and third-country nationals have crossed into Egypt. The rate of new arrivals has slowed under new admission policies from several thousand per day to only a few hundred. From 10 June, anyone entering Egypt, irrespective of age and gender, must have an Egyptian entry visa. On entry, Sudanese nationals can apply for a six-month residency visa, subject to the presentation of a notarized rent contract and approval by the Government of Egypt.

Women refugees, returnees, asylum seekers and third-party nationals can access maternal and child health services in Egypt free of charge, but this does not include EmONC. They can also access UNFPA's existing services for GBV prevention and response, including through women and girls' safe spaces, which are currently being expanded and strengthened through the hiring and training of additional case workers and psychologists. Reproductive health services are also being integrated into existing services at safe spaces.

Ethiopia

More than 62,000 people have crossed into Ethiopia since the onset of the crisis in Sudan via border crossing points in Metema, Amhara Region, and Kurmuk, Benishangul Gumuz. Overcrowded shelters and the absence of segregated shelter options for returnees and asylum seekers at Metema Point of Entry (PoE) and transit sites are significantly increasing protection-related risks for women and girls.



Access to integrated SRH and GBV services is severely limited due to insufficient human resources and medical supplies at surrounding health facilities. There are currently only two GBV partners in Metema, and no women and girl-friendly or dedicated spaces to ensure vulnerable women and girls have access to services and support. Limited access to food, water and relocation support for Ethiopian returnees at the PoE, transit and Kumer sites could exacerbate negative coping mechanisms.

South Sudan

More than 171,000 returnees and refugees have entered South Sudan since fighting started in Sudan on 15 April and that number is expected to increase if the crisis continues.

UNFPA is working with the wider humanitarian community in Upper Nile, Unity and Greater Bahr el Ghazal states to ensure returnees and refugees can access SRH and GBV services, including at existing UNFPA-supported health facilities, one-stop centres and women and girl-friendly spaces, in Malakal, Bentiu and Wau. Services are stretched, however, and essential SRH supplies are running low.

As a member of the Emergency Coordination Cell for the crises in Sudan, which reports to the Humanitarian Country Team (HCT), UNFPA is contributing to the revision and extension of the response plan for the Sudan crisis. The revised response plan is expected to be launched in the next few weeks.

UNFPA's response and priorities

UNFPA is coordinating efforts with national and state governments and humanitarian partners to scale up and strengthen the provision of integrated SRH and GBV prevention and response services in areas with high numbers of new arrivals.

Central African Republic

- Reproductive health supplies have been distributed to health centres in Am Dafok where people are arriving, and in Birao, where asylum seekers and returnees are being relocated.
- Homme de Galille, a UNFPA-implementing partner, is providing integrated SRH and GBV services in Birao.
- 75 Dignity Kits have been provided to women and girls in Am Dafok. An additional 225 kits have been prepositioned at Birao to be distributed to women and girls newly relocated from Am Dafok.

Chad

- A total of 18 midwives have been deployed, with priority given to flood-prone areas in refugee camps in Ouaddaï and Sila provinces, to ensure pregnant women have access to basic and comprehensive maternal health services.
- The capacity of mobile clinics, and existing health facilities, has been strengthened in Ouaddaï, Wadi Fira and Sila provinces to ensure providers can manage pregnancy-related complications, deliver family planning services and support GBV survivors – including psychosocial counselling and referrals to appropriate services.
- UNFPA is building capacity for GBV prevention and response service delivery in eastern Chad; three GBV specialists have been deployed to Farchana, Guereda and Goz Beida refugee camps.
- UNFPA is supporting two partner local NGOs, Association Tchadienne pour le Bien-Être Familial (ASTBEF) and Association pour le Développement et le Renforcement des Actions Humanitaires (ADRAH), to provide SRH/GBV services in Abéché and in camps in Ouaddaï province respectively.
- UNFPA and UNHCR are co-facilitating capacity building for 33 protection field agents on GBV in emergencies (GBViE) including case management.
- Tents will be deployed to serve as safe spaces in Arkoum (relocalization camp), Borota, Farchana and Gaga refugee camps and Toumtouma returnee camp.
- Around 4,000 Dignity Kits have been prepositioned in refugee camps in Ouaddaï province – Gaga, Farchana, Adre, Arkoum, Borota – and Toumtouma returnee camp.

Egypt

- Protection from sexual abuse and exploitation (PSEA) training is being provided to all staff at safe spaces in Aswan. Their capacity for case management is also being strengthened through training.
- Over 700 Sudanese women and girls have registered at six safe spaces in Aswan and Greater Cairo, where they are receiving GBV case management services, MHPSS, emergency housing support, legal and medical services, SRH services, and vocational skills training.
- 20,000 Dignity Kits are currently being procured for distribution to Sudanese refugees at six safe spaces, as well as through partner organizations supporting Sudanese refugees.
- UNFPA is partnering with Médecins Sans Frontières (MSF), UNHCR and other organizations to procure and distribute post-rape treatment kits. A capacity building training on CMR and the proper utilization of kits is being provided to all new organizations/implementing partners.
- UNFPA continues to lead the response to GBV, updating referral pathways and ensuring close coordination between partners.



Ethiopia

- Post-rape kits have been provided to health facilities at the Metema PoE and transit site area, which can support 180 survivors with CMR.
- 17 reproductive health kits have been repositioned for distribution to three health facilities in the Metema area. The kits can support more than 1,900 people with maternal and reproductive health services.
- GBV referral pathways have been established, and partners have received capacity building on case management to ensure survivors are referred to specialized care.

South Sudan

- UNFPA-supported GBV service delivery points and RH facilities in Malakal continue to provide integrated GBV prevention and response and RH services to women and girls inside and outside of the Protection of Civilian (PoC) site, including returnees who have arrived from Renk.
- In Malakal, UNFPA's-supported one stop centre (OSC) reached more than 550 people with GBV services including 200 women and more than 190 girls. More than 300 women and girls received information on GBV at women and girl-friendly spaces.
- In Malakal PoC site, more than 1,200 people, including 680 women, 35 pregnant women and 200 girls, received awareness messages on GBV. Members of community complaint mechanisms also reached more than 260 individuals with information on PSEA.
- During the reporting period, more than 220 Dignity Kits were distributed to vulnerable women and girls in Malakal, and 965 kits and 340 umbrellas were provided to women and girls in Renk. Around 200 Dignity Kits were distributed in Bentiu.
- In Bentiu, UNFPA strengthened the operations of the OSC, which provides comprehensive GBV response services, through the deployment of additional personnel. During the reporting period, the OSC continued to provide integrated RH/GBV services to vulnerable women, men, boys, and girls, including those affected by the crisis in Sudan.
- UNFPA coordinated the review and updating of GBV referral pathways with partners to strengthen GBV case referrals.



Financial requirements in response to the Sudan Emergency: Regional Refugee Response Plan, May – October 2023

Central African Republic	Chad	Egypt	Ethiopia	South Sudan	TOTAL
\$ 981,121	\$ 3,000,000	\$ 6,645,000	\$ 3,200,085	\$ 1,936,000	\$ 15,762,206

As part of the [Sudan Situation: Regional Refugee Response Plan \(May - October 2023\)](#) UNFPA is appealing for **\$ 15,762,206** to provide life-saving reproductive health and protection services to women and girls in need over the next six months.

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